

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.**Mail**Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name		Website	
Contact name. Primary applicant and contract manager	(Area code) Telephone number	Email (required)	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street)			
City		State	ZIP code
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.


**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

TODD M SOLBERG

PRINT or TYPE Name

X 

Signature of business or organization representative

12/05/17 SPOKANE COUNTY

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



4564-1

ASSOCIATED CREDIT SERVICE, INCORPORATED  
ASSOCIATED CREDIT SERVICE, INC.  
12815 E SPRAGUE AVE # 200  
SPOKANE VALLEY WA 99216-0742

DETACH BEFORE POSTING



STATE OF  
WASHINGTON

Corporation

ASSOCIATED CREDIT SERVICE, INCORPORATED  
ASSOCIATED CREDIT SERVICE, INC.  
12815 E SPRAGUE AVE # 200  
SPOKANE VALLEY, WA 99216-0742

UNEMPLOYMENT INSURANCE - ACTIVE  
COLLECTION AGENCY - ACTIVE

## BUSINESS LICENSE

Unified Business ID #: 600019846

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:

SPOKANE VALLEY GENERAL BUSINESS - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

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Company/Agency name <b>Denper Group Inc</b>		Website <b>DenperGroup.com</b>	
Contact name (Primary applicant and contact manager) <b>Dennis Perry</b>	(Area code) Telephone number <b>206 947 8505</b>	Email (required) <b>denpergroup@comcast.net</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>11902 124 Ave NE</b>			
City <b>Kirkland</b>		State <b>WA</b>	ZIP code <b>98045</b>
Mailing address of business (if different) <b>13720 460 Ave SE</b>			
City <b>North Bend</b>		State <b>WA</b>	ZIP code <b>98045</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601042893</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>we are in Automotive &amp; Boat sales we will use it to verify lienholders on title ins and purchases</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>No</b></p>			



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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2-16-18 North Burien WA  
Date and place (county) signed

Deanis Perry  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

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STATE OF  
WASHINGTON

## BUSINESS LICENSE

Corporation

DENPER GROUP, INC.  
11902 124TH AVE NE  
KIRKLAND, WA 98034

Unified Business ID #: 601042893

Business ID #: 001

Location: 0002

Expires: Mar 31, 2018

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE  
VESSEL DEALER #8525 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #1423 - ACTIVE

### LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vikki Smith*

Director, Department of Revenue



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If you currently have a CPS number, enter it here \_\_\_\_\_

13a

Company/Agency name <b>CASCADE FEDERAL CREDIT UNION</b>		Website <b>WWW.CASCADEFCU.ORG</b>	
Contact name. Primary applicant and contract manager <b>LORRIE FEBUS</b>	(Area code) Telephone number <b>425-251-3600</b>	Email (required) <b>FEBUS@CASCADEFCU.ORG</b>	
Contact name 2 (if applicable) <b>ELIZABETH MEZHUA</b>	(Area code) Telephone number <b>425-251-3600</b>	Email (required) <b>MEZHUA@CASCADEFCU.ORG</b>	
Physical address of business (number and street) <b>18020 . 80TH AVENUE S.</b>			
City <b>KENT</b>		State <b>WA</b>	ZIP code <b>98032</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601134161</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>WE ARE A CREDIT UNION, A FINANCIAL INSTITUTION OFFERING LOANS ON TITLED VEHICLES, VESSELS, RECREATIONAL VEHICLES. WE PLACE LIENS ON TITLES USED AS COLLATERAL.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>WE WILL NOT DISCLOSE INFORMATION OR CONTACT THE OWNER. INFORMATION WOULD BE USED TO VERIFY LIEN PLACEMENT OR RELEASE. ALSO TO VERIFY DISCREPANCIES ON LIEN/TITLES.</b></p>			

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*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2/15/18 KING COUNTY

Date and place (county) signed

LORRIE FEBUS FOR CASCADE FCU  
PRINT OR TYPE Name  
x *[Signature]* for Cascade FCU

Signature of business or organization representative

**Authorities:**

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If you currently have a CPS number, enter it here **13a**

Company/Agency name <b>POTLATCH NO. 1 FEDERAL CREDIT UNION</b>		Website	
Contact name. Primary applicant and contract manager <b>Stacey Messick</b>	(Area code) Telephone number <b>208-746-8900</b>	Email (required) <b>smessick@p1fcu.org</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1015 Warner Ave</b>			
City <b>Lewiston</b>		State <b>ID</b>	ZIP code <b>83501</b>
Mailing address of business (if different) <b>PO Box 897</b>			
City <b>Lewiston</b>		State <b>ID</b>	ZIP code <b>83501</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<u>2/14/2018 NEZ PERCE CO.</u> Date and place (county) signed	<u>Stacey Messick</u> PRINT or TYPE Name <b>X</b> <u>Stacey Messick</u> Signature of business or organization representative
--	---

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



## BUSINESS & OCCUPATION LICENSE

POST IN A  
CONSPICUOUS  
PLACE

THIS LICENSE EXPIRES 12/31/2018

LICENSE NUMBER:  
BL05-001332

**THIS LICENSE IS ISSUED TO:** POTLATCH #1 FEDERAL CREDIT UNION

Business Name and Mailing Address:

POTLATCH #1 FEDERAL CREDIT UNION  
1015 WARNER AVE  
LEWISTON, ID 83501

### GENERAL BUSINESS

This license is granted upon the condition that the licensee conforms to all law of the United States and the State of Idaho, having reference to the business or occupation for which this license is granted, and to all orders, resolutions and ordinance of the City of Lewiston, Idaho, applicable to such business or occupation, and on further condition this license is not transferrable to any other person, firm, corporation or location. Description of approved business or occupation:

CREDIT UNION

**LICENSED LOCATION:** 1015 WARNER AVE

DATE EFFECTIVE: 01/01/2018

LICENSE FEE: \$ 323.00

  
CITY AUTHORIZATION SIGNATURE

This is your Business & Occupation License for the City of Lewiston, Idaho. This license must be displayed in a prominent location upon the licensed premises. **CHANGE OF LOCATION OR OWNER:** A change in business location or change in owners will automatically void this license and necessitate application and issuance of a new license. **EXPIRATION:** This license is issued for one year, unless indicated otherwise or revoked. **LICENSE RENEWAL:** Licenses issued for one year are to be renewed on or before the expiration date. It is your responsibility to notify the City of Lewiston of any change in mailing address to ensure that you receive your renewal notice or any other correspondence. Failure of any person to receive any such forms shall not excuse the person for making application and securing a license. **DELINQUENT:** Those licenses not renewed by the due date shall be considered delinquent and subject to a delinquent penalty. **OUT OF BUSINESS:** Notify the City of Lewiston of business closure and date of closure.

**THIS LICENSE IS NOT TRANSFERRABLE TO ANY OTHER PERSON, FIRM, CORPORATION OR LOCATION.**





## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

cpe@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Credit Concepts of WA, LLC</b>		Website <b>www.creditconcepts.com</b>	
Contact name, Primary applicant and contract manager <b>Kristin Piper</b>	(Area code) Telephone number <b>253-613-6950 x 406</b>	Email (required) <b>kpiper@creditconcepts.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>22632 Hwy 99 Ste V</b>			
City <b>Edmonds</b>		State <b>WA</b>	ZIP code <b>98026</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>We are an auto finance company, we will use these records to verify correct title transfers.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>No.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@doj.wa.gov](mailto:cps@doj.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2/14/18 *Quokomish only* *Kristin Piper*  
Date and place (county) signed PRINT or TYPE Name  
*[Signature]*  
Signature of business or organization representative

Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Domestic Limited Liability Company

Unified Business ID #: 602 463 583  
Business ID #: 1  
Location: 1

CREDIT CONCEPTS OF WASHINGTON, LLC  
CREDIT CONCEPTS  
23632 HIGHWAY 99 STE V  
EDMONDS WA 98026 9206

TAX REGISTRATION  
INDUSTRIAL INSURANCE  
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:  
Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:  
CREDIT CONCEPTS

LICENSE NUMBER  
BL-010015

## CITY OF EDMONDS LICENSE

LICENSE YEAR  
2018

Business License

This license must be displayed and may not be transferred or assigned.  
Effective January 1 through December 31 of license year except where noted.

CREDIT CONCEPTS OF WASHINGTON LLC  
23632 HIGHWAY 99  
V  
EDMONDS, WA 98026

BY:   
(CITY CLERK SIGNATURE)

LICENSE ISSUE DATE  
1/1/2018

## Vehicle/Vessel On-line Access Contract Application-CPS

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**Email (quickest)**

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Garry Fourre</b>		Website <b>NA</b>	
Contact name. Primary applicant and contract manager <b>Garry T. Fourre</b>	(Area code) Telephone number <b>360 870 2873</b>	Email (required) <b>Garry4a@aol.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>6202 Puget Rd NE</b>			
City <b>Olympia</b>		State <b>Wa.</b>	ZIP code <b>98516</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601088015</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>I am a Recreational vehicle storage facility and will use this information to contact the owners that have abandoned their vehicles.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>I will use this information to send a certified letter to contact the owner. I will contact an attorney if necessary.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties—RCW 46.12.640.

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

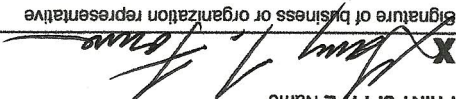
#### Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Garry T. Fourre

PRINT or TYPE Name

 X

Signature of business or organization representative

Date and place (county) signed

Feb. 13, 2018

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Vehicle/Vessel On-line Access  
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)  
**cps@dol.wa.gov**  
Print and scan or upgrade to  
**Adobe Reader XI** or above to fill it in  
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Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**  
(360) 570-7895

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If you currently have a CPS number, enter it here \_\_\_\_\_

13a

Company/Agency name <b>GT Investigations Inc</b>		Website <b>gtinvestigations.com</b>	
Contact name Primary applicant and contract manager <b>Joe Griffin</b>	(Area code) Telephone number <b>509 8361421</b>	Email (required) <b>gtinvestigations@yahoo.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>22 W Mission Ave Ste 116</b>			
City <b>Spokane WA</b>		State <b>WA</b>	ZIP code <b>99201</b>
Mailing address of business (if different) <b>SAME</b>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Private investigations - criminal &amp; civil locates, verification &amp; backgrounds</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>Per subpoena or through discovery</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2/12/18 Spokane County

Date and place (county) signed

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

## BUSINESS LICENSE

### Corporation

G/T INVESTIGATIONS, INC.  
G T PROCESS SERVICE  
222 W MISSION AVE  
SPOKANE, WA 99201-2344

TAX REGISTRATION - ACTIVE

Unified Business ID #: 602462278  
Business ID #: 001  
Location: 0002  
Expires: Jan 31, 2019

### CITY ENDORSEMENTS:

SPOKANE GENERAL BUSINESS #T12038935BUS - ACTIVE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue





STATE OF  
WASHINGTON

Office of the Secretary of State  
Corporations Division

## LEGAL ENTITY REGISTRATION

G/T INVESTIGATIONS, INC.  
422 W RIVERSIDE STE 1100  
SPOKANE, WA 99201

Unified Business ID #: 602462278

Expiration: Jan-31-2019

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

Secretary of State

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**cps@dol.wa.gov**

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Vehicle Records Disclosure Unit

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PO Box 2957

Olympia, WA 98507

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>BT Process Service</b>		Website <b>btinvestigations.com</b>	
Contact name, Primary applicant and contract manager <b>Joe Griffin</b>	(Area code) Telephone number <b>509 838 1421</b>	Email (required) <b>btinvestigation@yahoo.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>222 W Mission Ave Ste 110</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99201</b>
Mailing address of business (if different) <b>SAME</b>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p style="text-align: center; font-size: 1.2em;"><b>LEGAL PROCESS SERVICE</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p style="text-align: center; font-size: 1.2em;"><b>Serve them legal court documents</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2/2/18 Spokane County  
Date and place (county) signed

Joe Griffin  
PRINT or TYPE Name

Joe Griffin  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

cps@doi.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [doi.wa.gov/forms/formspd.html](http://doi.wa.gov/forms/formspd.html)

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If you currently have a CPS number, enter it here \_\_\_\_\_

13a

Company/Agency name <b>Heckman Motors Inc</b>		Website	
Contact name. Primary applicant and contract manager <b>Jack Heckman</b>	(Area code) Telephone number <b>360.460.1073</b>	Email (required) <b>jackheckman@olypen.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>111 E. Front Street</b>			
City <b>Port Angeles</b>		State <b>WA</b>	ZIP code <b>98362</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>600016076</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>Management and parking enforcement for parking lots owned by Clallam Transit and City of Port Angeles.</b>  Information needed to contact owners of vehicles given "parking notice fee"			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>Yes- Vehicles parking without advance payment, overtime, improperly, or unauthorized will contact via USPS</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Jack Heckman

PRINT or TYPE Name

02-06-18 Clallam County

Date and place (county) signed

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

HECKMAN MOTORS, INC.  
BUDGET RENT-A-CAR PORT ANGELES  
111 E FRONT ST  
PORT ANGELES, WA 98362-2906

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
TAX REGISTRATION - ACTIVE

Unified Business ID #: 600016076

Business ID #: 001

Location: 0003

Expires: Mar 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
RENTAL CAR REGISTRATION #R61360 - ACTIVE  
MOTOR VEHICLE DEALER #1114 - ACTIVE

## DUTIES OF MINORS:

PARKING ATTENDANT, CAR WASHING

## LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

3/21/17 Forward to Manheim 253-395-2272

**Vehicle/Vessel On-line Access  
Contract Application-CPS**

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**Email** (quickest)**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here **13a**

Company/Agency name <b>Dameron Ford</b>		Website <b>www.dameronford.com</b>	
Contact name, Primary applicant and contract manager <b>Jessica Meyers</b>	(Area code) Telephone number <b>503.530.2629</b>	Email (required) <b>Jessica@beavertonauto.com</b>	
Contact name 2 (if applicable) <b>Bonita Nowatzki</b>	(Area code) Telephone number <b>503.530.2698</b>	Email (required) <b>Bonnie@dameronford.com</b>	
Physical address of business (number and street) <b>12325 SN Canyon Rd.</b>			
City <b>Beaverton</b>		State <b>OR</b>	ZIP code <b>97005</b>
Mailing address of business (if different) <b>PO Box 161</b>			
City <b>Beaverton</b>		State <b>OR</b>	ZIP code <b>97075</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)

## Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

**We are a car dealership. We used the records to verify ownership when a vehicle is traded in.**

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

**We would only contact our customer to ensure we have proper documentation from them. We would not provide the information to anyone else.**



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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**Submit the following documentation with your application:**

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2/10/18 Washington County  
Date and place (county) signed Oregon

Jessica Meyers  
PRINT or TYPE Name

X [Signature]  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster** (Data brokers/resellers applying for CPS must complete and return this section)

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



# VEHICLE DEALER CERTIFICATE

## DA1503

**EFFECTIVE: NOVEMBER 1, 2017**

**EXPIRES: NOVEMBER 30, 2020**

*Issued To:*

**DAMEROW FORD CO  
DBA: DAMEROW FORD  
12325 SW CANYON RD  
BEAVERTON OR 97005**

*This business is authorized to engage in buying, selling, or dealing in new or used vehicles in the state of Oregon under the provisions of ORS 822.020, and to exercise privileges granted by certificate under the provisions of ORS 822.040.*

*To be valid, this certificate must be prominently posted at the business address listed above and is not valid at any other location. It is not valid if expired, revoked, canceled or suspended, under the provisions of ORS 822.045 and ORS 822.050.*

*Driver and Motor Vehicle Services  
Department of Transportation  
Salem OR 97314*

**\* ALTERATION, MUTILATION OR ERASURE WILL VOID CERTIFICATE \***



**Vehicle/Vessel On-line Access  
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

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**cps@dol.wa.gov**

Print and scan or upgrade to

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**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here \_\_\_\_\_

**13a**

Company/Agency name <i>Progressive Insurance</i>		Website	
Contact name, Primary applicant and contract manager <i>DAVID DARE</i>	(Area code) Telephone number <i>440-910-0775</i>	Email (required) <i>DDARE@Progressive.com</i>	
Contact name 2 (if applicable) <i>Ryan Briceand</i>	(Area code) Telephone number <i>440-910-0755</i>	Email (required) <i>Ryan_K_Briceand@Progressive.com</i>	
Physical address of business (number and street) <i>625 Alpha Drive</i>			
City <i>HIGHLAND HTS,</i>		State <i>OHIO</i>	ZIP code <i>44143</i>
Mailing address of business (if different) <i>Same</i>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <i>6d</i>	Employer Identification Number (EIN) <i>Same on File</i>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>Insurance Company uses System to gain Documents used to Evaluate liability and bring claims to resolution.</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>We may contact owners via telephone, mail, or Email. We would contact owners for the purpose of investigating Suspected Fraud insurance claims.</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Feb. 6, 2018  
Date and place (county) signed

DAVID DARE  
PRINT or TYPE Name  
x David Dare  
Signature of business or organization representative

**Authorities:**

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

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<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Effective Date: December 11, 1956

Expiration Date: June 30, 2015

**State of Ohio**  
**Department of Insurance**  
*Certificate of Authority*

This is to Certify, that

**PROGRESSIVE CASUALTY INSURANCE COMPANY**

NAIC No. 24260

is organized under the laws of this State as of November 17, 1956 and is authorized to issue policies and transact business under the following section(s) of the Ohio Revised Code:

**Section 3929.01 (A)**

Aircraft	Ocean Marine
Allied Lines	Other Liability
Boiler & Machinery	Private Passenger Auto - Liab
Burglary & Theft	Private Passenger Auto-Other
Commercial Auto - Liability	Private Passenger-Phys Damage
Commercial Auto - No Fault	Surety
Commercial Auto - Phys Damage	
Credit	
Earthquake	
Fidelity	
Fire	
Glass	
Inland Marine	
Medical Malpractice	
Multiple Peril - Commercial	
Multiple Peril - Farmowners	
Multiple Peril - Homeowners	

This Certificate of Authority is subject to the laws of the State of Ohio.



**John R. Kasich, Governor**

*Mary Taylor*

Mary Taylor, Lt. Governor/Director

# **Vehicle/Vessel On-line Access Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Honda of Fife</b>		Website <b>www.HondaofFife.com</b>	
Contact name. Primary applicant and contract manager <b>Brittanie Pivinski</b>	(Area code) Telephone number <b>253-922-2673</b>	Email (required) <b>Brittanie@hondaoffife.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>4301 20th St. E</b>			
City <b>Fife</b>		State <b>WA</b>	ZIP code <b>98424</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 20px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>New and used car dealership. Honda of Fife will use the vehicle/vessel records to verify if there is a lien holder or 2nd registered owner is on file if a vehicle is being traded into Honda of Fife.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>No.</b></p>			



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name DBA Honda of Fife Dean Lee Inc. of Fife	Contact name Brittanie Pivinski	Email Brittanie@hondaoffife.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E Fife, WA 98424		Subscriber's permissible use CDM Verify legal/registered owners for vehicles traded in or purchased at Honda of Fife.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name DBA Honda of Fife Dean Lee Inc.	Contact name John Short	Email	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E Fife, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name DBA Honda of Fife Dean Lee Inc.	Contact name Chris Wolfe	Email cwolfe@hondaoffife.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E Fife, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>4</b>	Legal business name DBA Honda of Fife Dean Lee Inc.	Contact name Dennis Lee	Email Dlee@hondaoffife.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E Fife, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>5</b>	Legal business name DBA Honda of Fife Dean Lee Inc.	Contact name Tom Bryant	Email Tom@hondaoffife.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E Fife, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

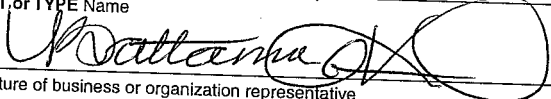
**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1/29/2018 File, WA  
Date and place (county) signed

Brittanie Pivinski  
PRINT, or TYPE Name  
X   
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON  
Corporation

# BUSINESS LICENSE

Unified Business ID #: 601131296  
Business ID #: 001  
Location: 0001  
Expires: Nov 30, 2018

DEAN LEE, INC.  
HONDA OF FIFE  
4301 20TH ST E  
FIFE, WA 98424-1848

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
MOTOR VEHICLE DEALER #3572 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

## CITY ENDORSEMENTS:

FIFE GENERAL BUSINESS - ACTIVE

## DUTIES OF MINORS:

FILING, WASHING CARS, BLDG MAINT, ANSWER PHONES. \*SERVICE OCCUPATIONS: IF A MINOR WORKS PAST 8:00 P.M.: MINOR MUST BE SUPERVISED BY A RESPONSIBLE ADULT EMPLOYEE WHO MUST REMAIN ON PREMISE AT ALL TIMES.\*

## LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

## REGISTERED TRADE NAMES:

HONDA OF FIFE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vikki Smith*

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 601131296 001 0001

Expires: Nov 30, 2018

DEAN LEE, INC.  
HONDA OF FIFE  
4301 20TH ST E  
FIFE, WA 98424-1848

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #3572 -  
ACTIVE



# Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a ← DOL Account Number

Company/Agency name <u>Mayflower Metals, Inc.</u>		Website <u>www.mayflowermetals.com</u>	
Contact name. Primary applicant and contract manager <u>Brian Green</u>	(Area code) Telephone number <u>(509) 786-1818</u>	Email (required) <u>briang@mayflowermetals.com</u>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <u>139406 W Johnson Rd.</u>			
City <u>Prosser</u>		State <u>WA</u>	ZIP code <u>99350</u>
Mailing address of business (if different) <u>PO Box 84</u>			
City <u>Prosser</u>		State <u>WA</u>	ZIP code <u>99350</u>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><u>We are a Scrap Metal Processor, a Hulk Hauler, and Motor Vehicle Salvage Processor. We are a metal recycling business that accepts scrap metal, including vehicles, semi trucks, trailers of various sizes, and motorcycles. We do not except boats unless they are primarily made of metal and not fiberglass, carbon fiber, or other materials that are not metal.</u></p> <p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><u>We would only do a CPS search when a vendor is bringing in a vehicle to be sold as scrap. During the process of purchasing the vehicle for scrap, we collect the vendors name, address, phone number, driver's license number, and a scan of their driver's license, and signature. How we see it is, if we are presented with any information on a vehicle that show any theft or criminal information we will contact the proper authorities, if needed. Then we ask the authorities regarding contact with the owner. We have contacted our local Wrecking Inspector, Tropper Michael K. Wells, of the Washington State Patrol, regarding the proper procedure with accepting vehicles for scrap in relation to the procedure with CPS (IUIPS).</u></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

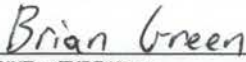

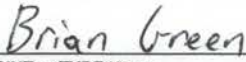

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<div style="text-align: center;"> _____ PRINT or TYPE Name</div> <div style="text-align: center;"> _____ Signature of business or organization representative</div>	<div style="text-align: center;"> _____ PRINT or TYPE Name</div> <div style="text-align: center;"> _____ Signature of business or organization representative</div>
--	--

1/23/2018 Benton County  
Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



**Vehicle/Vessel On-line Access  
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.**Mail**Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a**

Company/Agency name <b>EVERETT BAYSIDE MARINE</b>		Website <b>BAYSIDEMARINE.COM</b>	
Contact name. Primary applicant and contract manager <b>DAN HATCH</b>	(Area code) Telephone number <b>425-212-2241</b>	Email (required) <b>DAN@BAYSIDEMARINE.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1111 CRAFTSMAN WAY</b>			
City <b>EVERETT</b>		State <b>WA</b>	ZIP code <b>98201</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) <b>C 600-603-639</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <b>BOAT AND TRAILER SALES, NEW AND USED CONSIGNMENT BOAT REPAIR AND PARTS SALES BOAT STORAGE</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  <b>WILL NOT DISCLOSE ANY INFORMATION TO ANY PERSON OR BUSINESS INFORMATION ONLY USED TO CONFIRM CORRECT VIN AND HIN NUMBERS AND TO CONFIRM REGISTERED AND LEGAL OWNERS PRIOR TO SELLING AND TRANSFERRING TITLE</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

01/23/2018 SNOHOMISH

Date and place (county) signed

DAN HATCH

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name EVERETT BAYSIDE MARINE INC	Contact name Dan Hatch	Email dan@baysidemarine.com	(Area code) Phone number 425-212-2241
	Address, City, State, Zip code 1111 CRAFTSMAN WAY, EVERETT WA 98201		Subscriber's permissible use  <b>FULL USE</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



# Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)** cps@dol.wa.gov  
**Print and scan or upgrade to Adobe Reader XI or above to fill it in**  
**Mail** Vehicle Records Disclosure Unit  
 Department of Licensing  
 PO Box 2957  
 Olympia, WA 98507

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict disclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name <b>A-AFFORDABLE BAIL BONDS LLC</b>		Contact name, Primary applicant and contract manager <b>Bryan Wester</b>		Contact name 2 (if applicable) <b>Kate Solein</b>	
Physical address of business (number and street) <b>615 W 11th St</b>		City <b>Vancouver</b>		State <b>WA</b>	
Mailing address of business (if different)		City		State	
ZIP code <b>98660</b>		ZIP code		ZIP code	
Provide one of these identifiers		Taxpayer Identification Number (TIN)		Employer Identification Number (EIN)	
WA United Business Identifier (UBI) <b>602 196 197</b>					

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Verify accuracy in for motor. Verify ownership of a vehicle. Bail bonds. Take vehicles as collateral at times.

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. May use information to contact of locate a defendant or co-signer.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties—RCW 46.12.640.

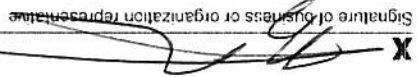
Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

### Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

**PRINT or TYPE Name**  
Bryan West  
**Signature of business or organization representative**  
  
**Date and place (county) signed**  
1/23/18 Clark

Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

## Vehicle/Vessel On-line Access Contract Application – CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**
**cps@dol.wa.gov**

Print and scan or upgrade to  
**Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing **Adobe**  
PO Box 2957  
Olympia, WA 98507

**Fax**
**(360) 570-7895**

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

**13a**

Company/Agency name Reliable Credit Association Inc. (WA)		Website Reliablecredit.com	
Contact name. Primary applicant and contract manager Tracy Daniels	(Area code) Telephone number 425-778-7000	Email (required) <a href="mailto:tdaniels@reliablecredit.com">tdaniels@reliablecredit.com</a>	
Contact name 2 (If applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 5031 168 <sup>th</sup> St SW Suite 185			
City Lynnwood		State WA	ZIP code 98258
Mailing address of business (if different) <b>Box 836</b>			
City Lynnwood		State WA	ZIP code 98258
<b>Provide one of these identifiers</b>	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601-568-688
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Title look up to confirm lien has been perfected. Title look up to confirm registered owner status.</p>			



Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. Only if required to obtain proper title documents.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- s **Washington State business** – Attach a legible copy of your current business license
  - s **Business outside Washington State** – Attach a legible copy of **one** of the following:
    - Your current business license or
    - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
  - s **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
    - Your Articles of Incorporation, filed with the Secretary of State or
    - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Services
- Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state. s **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Tracy Daniels

PRINT or TYPE Name

1/22/18 Snohomish

Date and place (county) signed

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725

Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02

Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**

**Each data broker or reseller must:**

s -MAINTAIN A LEGIBLE SUBSCRIBER ROSTER AND COMPLETE

ALL FIELDS s RECORD ALL SUBSCRIBERS s DOCUMENT

THE SPECIFIC PERMISSIBLE USE QUALIFICATION FOR EACH

SUBSCRIBER

s RETAIN SUBSCRIBER ROSTER AND NOTIFICATION LETTERS SENT BY SUBSCRIBERS FOR THE TERM OF THE CONTRACT AND FOR THREE YEARS from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Reliable Credit Association Inc (WA)	Contact name Serena Dingel	Email <a href="mailto:smdingel@reliablecredit.com">smdingel@reliablecredit.com</a>	(Area code) Phone number 425 778 7000
Address, City, State, Zip code 5031 168 <sup>th</sup> St SW Suite 185 Lynnwood WA 98046			Subscriber's permissible use Title look up to confirm lien perfected or confirm registered owner.	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
2	Legal business name	Contact name	Email	(Area code) Phone number
Address, City, State, Zip code			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				
3	Legal business name	Contact name	Email	(Area code) Phone number
Address, City, State, Zip code			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				
4	Legal business name	Contact name	Email	(Area code) Phone number
Address, City, State, Zip code			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				
5	Legal business name	Contact name	Email	(Area code) Phone number

	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.





**City of Lynnwood**  
4114 198th ST SW / P.O. Box 5008  
Lynnwood, WA 98046-5008  
(425) 670-5421  
www.lynnwoodwa.gov

## BUSINESS LICENSE CERTIFICATE

(YOUR LOCAL SALES TAX CODE IS 3110)

**Business Name:** RELIABLE CREDIT ASSOC INC

**Business Type(s):** 522220 Sales Financing

**Business Location:** 5031 168TH ST SW STE 185  
LYNNWOOD, WA 98037

**Mailing Address:** PO BOX 836  
LYNNWOOD, WA 98046

**Owner:**

**License Number:** 004460-01-2000

**License Type:** Resident

**Issued Date:** 1/2/2018

**Classification:** Resident Business License

**Expiration Date:** 1/2/2019

**Fees Paid:** \$2,290.50

Community Development Director

*A great deal more*

NOT TRANSFERABLE OR ASSIGNABLE.

THIS LICENSE MUST BE POSTED IN PUBLIC VIEW AT THE BUSINESS LOCATION.

RELIABLE CREDIT ASSOC INC

PO BOX 836  
LYNNWOOD, WA 98046



## Vehicle/Vessel On-line Access Contract Application-CPS

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**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here

**13a**

Company/Agency name <b>Sergeants Towing Inc</b>		Website <b>www.sergeantstowing.com</b>	
Contact name. Primary applicant and contract manager <b>Amanda J. Ferree</b>	(Area code) Telephone number <b>(503)281-1948</b>	Email (required) <b>amanda@sergeantstowing.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>2045 N. Vancouver Ave.</b>			
City <b>Portland</b>		State <b>OR</b>	ZIP code <b>97227</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <div style="background-color: black; color: white; padding: 2px 5px;"><b>6d</b></div>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a towing company. Information obtained will be used to notify registered owners and lien holders of the vehicles impoundment.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>The owners will be contacted via certified mail to notify them of the vehicles impoundment.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private Investigator** – Attach a legible copy of your current private investigator license.

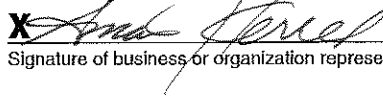
*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Amanda J. Ferree

PRINT or TYPE Name

01/21/2018 Multnomah County Oregon

Date and place (county) signed



Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**CITY OF PORTLAND**  
OFFICE OF MANAGEMENT AND FINANCE  
BUREAU OF REVENUE AND FINANCIAL SERVICES

**Ted Wheeler, Mayor**  
**Ken Rust, Chief Financial Officer**  
**Thomas W. Lannom, Revenue Division Director**

**Terri Williams, Manager**  
**Tax Division**  
**Revenue Division**  
111 SW Columbia Street, Suite 600  
Portland, Oregon 97201-5840  
(503) 823-5157  
FAX (503) 823-5192  
TDD (503) 823-6868

April 4, 2017



SERGEANTS TOWING INC  
DBA SECURITY TOWING & RECOVERY LLC  
2045 N VANCOUVER AVE  
PORTLAND OR 97227-1964

**Account Number**

6a

**RE: Certificate of Compliance**

**Questions? Call (503) 865-2478**

 <b>MULTNOMAH COUNTY</b>	<b>CERTIFICATE OF COMPLIANCE</b> REVENUE DIVISION - TAX DIVISION, 111 SW COLUMBIA ST., SUITE 600, PORTLAND, OR 97201-5840 PHONE: (503) 823-6157, FAX: (503) 823-5192, TDD: (503) 823-6868	
<b>ACCOUNT:</b>	6a	<b>DATE ISSUED:</b> April 4, 2017
<b>TAXFILER:</b>	SERGEANTS TOWING INC DBA SECURITY TOWING & RECOVERY LLC 2045 N VANCOUVER AVE PORTLAND OR 97227-1964	
<b>LOCATION:</b>	12175 N NORTH PORTLAND RD PORTLAND OR 97217	
<b>Is in compliance with the City of Portland Business License Tax Law and Multnomah County Business Income Tax Law as of April 4, 2017.</b>		
<small>A Certificate of Compliance indicates that on the date of issuance the business was in compliance with applicable tax laws. It does not exempt the holder from annual filing requirements, nor does it entitle the holder to engage in any business activity not otherwise allowed by federal, state, and/or local laws.</small>		
REVBUR 12/01		

*An Equal Opportunity Employer*

To help ensure equal access to programs, services and activities,  
the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary  
aids/services to persons with disabilities upon request.

[www.portlandoregon.gov/revenue](http://www.portlandoregon.gov/revenue)

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>GRANGE INSURANCE ASSOCIATION</b>		Website <b>www.grange.com</b>	
Contact name, Primary applicant and contract manager <b>CARRON L LAFORCE</b>	(Area code) Telephone number <b>206-753-4392</b>	Email (required) <b>carron.laforce@grange.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>200 CEDAR STREET</b>			
City <b>SEATTLE</b>		State <b>WA</b>	ZIP code <b>98121</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <b>Personal lines insurer.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>We will contact the owner for insurance purposes only and may, depending on the investigation, forward this information to an attorney for investigation or settlement purposes. We may contact the owner via US Mail, phone, email, or text.</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Carron L LaForce

PRINT or TYPE Name

X   
Signature of business or organization representative

January 19, 2018

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725

Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02

Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

**MASTER LICENSE SERVICE**  
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400  
**REGISTRATIONS AND LICENSES**

Unified Business ID #: 600 175 994  
Business ID #: 1  
Location: 1

**GRANGE INSURANCE ASSOCIATION**  
200 CEDAR ST  
SEATTLE WA 98121 1223

**TAX REGISTRATION**  
**INDUSTRIAL INSURANCE**

**UNEMPLOYMENT INSURANCE**

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

  
Director, Department of Licensing

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>First American Title</b>		Website	
Contact name, Primary applicant and contract manager <b>Heather Shurtliff</b>	(Area code) Telephone number <b>509-248-7650</b>	Email (required) <b>hshurtliff@firstam.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>4710 Summitview # 204</b>			
City <b>Yakima</b>	State <b>WA</b>	ZIP code <b>98908</b>	
Mailing address of business (if different)			
City	State	ZIP code	
Provide one of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 20px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Title Company- We use the System to verify Registered and legal owners of Mobile Homes</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>NO</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<u>1/17/18</u> Date and place (county) signed	<u>Heather Shurtell</u> PRINT or TYPE Name <input checked="" type="checkbox"/> <u>Heather Shurtell</u> Signature of business or organization representative
--	--

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

# CITY OF YAKIMA LICENSE



License #  
BL076743

UBI #  
600213895

# Persons  
17

License Fee  
\$321.15

FOR: Comm Bus Lic Within City of Yakima

LOCATION: 4710 SUMMITVIEW AVE #204

ISSUED ON: January 01, 2018

VALID TO: December 31, 2018

I  
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D

FIRST AMERICAN TITLE  
4710 SUMMITVIEW AVE #204  
YAKIMA, WA 98908

The issuance of this license is a tax on your business activity and does not entitle you to conduct business in violation of any other federal, state or local laws.

## CITY OF YAKIMA LICENSE

NAME: FIRST AMERICAN TITLE

FOR: Comm Bus Lic Within City of Yakima

LICENSE: BL076743

FEE: \$321.15

EXPIRES: 12/31/2018

NOT TRANSFERABLE

## CITY OF YAKIMA LICENSE

For: Comm Bus Lic Within City of Yakima

DBA Name: FIRST AMERICAN TITLE

Location: 4710 SUMMITVIEW AVE #204  
YAKIMA, WA 98902

Amount: \$321.15

License #: BL076743

Payment Method: Online Payment

Date: 12/26/2017

## RECEIPT

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Vehicle Records Disclosure Unit

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PO Box 2957

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If you currently have a CPS number, enter it here \_\_\_\_\_

13a

Company/Agency name <b>Rainier Dodge Inc</b>		Website <b>www.rainierdodge.com</b>	
Contact name, Primary applicant and contract manager <b>Cindy Richeson</b>	(Area code) Telephone number <b>360-754-5550</b>	Email (required) <b>cricheson@rainierdodge.com</b>	
Contact name 2 (if applicable) <b>Cesare Johnson</b>	(Area code) Telephone number <b>360-754-5550</b>	Email (required) <b>cjohnson@rainierdodge.com</b>	
Physical address of business (number and street) <b>2550 Carriage Ln SW</b>			
City <b>Olympia</b>	State <b>WA</b>	ZIP code <b>98502</b>	
Mailing address of business (if different)			
City	State	ZIP code	
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Auto Dealer. We use vehicle records to check reg. owners &amp; legal owners so we get all required signatures. Also to see what bank to payoff.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>we would only contact the customer/owner if we need further documentation signed. we may call, email, or even mail to contact the owner. we would not provide the information to any other person/business.</b></p>			



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- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1-17-18 Thurston  
Date and place (county) signed

Cindy Richeson  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name <i>Rainier Dodge</i>	Contact name <i>Cindy Richeson</i>	Email <i>cricheson@rainierdodge.com</i>	(Area code) Phone number <i>360-754-5550</i>
	Address, City, State, Zip code <i>2550 Carriage Ln SW Olympia WA 98502</i>		Subscriber's permissible use <i>check legal owner for payoff used to make sure we have all releases to sell vehicle.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name <i>Rainier Dodge</i>	Contact name <i>Debra Binion</i>	Email <i>debrabinion@gmail.com</i>	(Area code) Phone number <i>360-754-5550</i>
	Address, City, State, Zip code <i>2550 Carriage Ln SW Olympia WA 98502</i>		Subscriber's permissible use <i>info used to ensure we have all proper releases to sell vehicle</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF  
WASHINGTON  
Corporation

## BUSINESS LICENSE

Unified Business ID #: 600554884  
Business ID #: 001  
Location: 0001  
Expires: Mar 31, 2018

RAINIER DODGE, INC.  
RAINIER DODGE  
2550 CARRIAGE LOOP DR  
OLYMPIA, WA 98502

UNEMPLOYMENT INSURANCE - ACTIVE  
RENTAL CAR REGISTRATION #R61375 - ACTIVE  
MOTOR VEHICLE DEALER #1156 (EXPIRES  
10/31/2018) - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

### CITY ENDORSEMENTS:

OLYMPIA GENERAL BUSINESS #1804 (EXPIRES 10/31/2018) - ACTIVE

### LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vikki Smith*

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 600554884 001 0001

Expires: Mar 31, 2018

RAINIER DODGE, INC.  
RAINIER DODGE  
2550 CARRIAGE LOOP DR  
OLYMPIA, WA 98502

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
RENTAL CAR REGISTRATION  
#R61375 - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #1156  
(EXPIRES 10/31/2018) - ACTIVE



## Vehicle/Vessel On-line Access Contract Application-CPS

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Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>JRT Auto Inc DBA Mazda of Everett</b>		Website	
Contact name, Primary applicant and contract manager <b>Cindy Ashbridge</b>	(Area code) Telephone number <b>(425) 353-3403</b>	Email (required) <b>Cashbridge@mazdaofeverett.com</b>	
Contact name 2 (if applicable) <b>Andrea Green</b>	(Area code) Telephone number <b>(425) 353-3403</b>	Email (required) <b>AndreaK@mazdaofeverett.com</b>	
Physical address of business (number and street) <b>MAZDA OF EVERETT 11409 HWY-99 EVERETT, WA 98204 425-353-3403</b>			
City		State	ZIP code
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <div style="background-color: black; color: white; text-align: center;">6d</div>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>602-885-976</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <div style="font-size: 1.2em; color: blue;">We are a new /used Auto Dealership</div>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  <div style="font-size: 1.2em; color: blue;">We would only contact Customer if there was an issue that need them to take Care of Like a 2nd Reg owner or Legal owner undisclosed.</div>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1-17-2018 Snoh CO.  
Date and place (county) signed

Cindy Ashbridge  
PRINT or TYPE Name

X Cindy Ashbridge  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name JRS Auto Inc DAA Mazda of Everett	Contact name Cindy Ashbridge	Email Cashbridge@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
2	Legal business name Same as above	Contact name Dee Lopez	Email Dee@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
3	Legal business name Same as above	Contact name Jennifer McCann	Email Jennmccann@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
4	Legal business name Same as Above	Contact name Tony Keel	Email TKeel@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code Same as Above			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
5	Legal business name Terad McCann	Contact name Mazda of Everett	Email Terad@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
6	Legal business name Mazda of Everett	Contact name Mike Olmsted	Email MikeO@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
7	Legal business name Mick Jones	Contact name Mazda of Everett	Email mick@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Evergreen, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.





STATE OF  
WASHINGTON

## BUSINESS LICENSE

Corporation

JRJ AUTO, INC.  
MAZDA OF EVERETT  
11409 HIGHWAY 99  
EVERETT, WA 98204

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

Unified Business ID #: 602885976

Business ID #: 001

Location: 0001

Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #2984 - ACTIVE

### LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

### REGISTERED TRADE NAMES:

MAZDA OF EVERETT

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 602885976 001 0001

JRJ AUTO, INC.  
MAZDA OF EVERETT  
11409 HIGHWAY 99  
EVERETT, WA 98204

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #2984 -  
ACTIVE

Expires: Dec 31, 2018

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**  
cps@dol.wa.gov  
Print and scan or upgrade to  
Adobe Reader XI or above to fill it in  
and save it.

**Mail**  
Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**  
(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>BECU</b>		Website	
Contact name, Primary applicant and contract manager <b>Sheila A Smyre</b>	(Area code) Telephone number <b>206-436-1399</b>	Email (required) <b>Sheila.Smyre@BECU.org</b>	
Contact name 2 (if applicable) <b>Boyd Vanderkleet</b>	(Area code) Telephone number <b>206-438-5008</b>	Email (required) <b>boyd.vanderkleet@BECU.</b>	
Physical address of business (number and street) <b>12770 Gateway BR Mail stop 1080-2</b>			
City <b>Tukwila</b>		State <b>WA</b>	ZIP code <b>98168</b>
Mailing address of business (if different) <b>PO BOX 97050</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98124</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>Credit Union - use for verification of collateral for consumer lending</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>Owners have already contacted us for a loan - only reach out to them if BECU is not listed as a lien holder as agreed</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/16/18 King County  
Date and place (county) signed

Sheila A Smyre, Manager Consumer Loan Servicing  
PRINT or TYPE Name  
X Sheila A Smyre  
Signature of business or organization representative  
Manager, Consumer Loan Servicing

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Unified Business ID #: 603342832

Business ID #: 001

Location: 0001

Expires: Feb 28, 2018

Limited Liability Company

SEATTLE POWERSPORTS, LLC  
LAWLESS HARLEY-DAVIDSON OF RENTON  
3715 E VALLEY RD  
RENTON, WA 98057

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT (EXPIRES 10/31/2018) -  
ACTIVE  
MOTOR VEHICLE DEALER #10133 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE  
MISCELLANEOUS VEHICLE DEALER #6107 (EXPIRES  
10/31/2018) - ACTIVE

## DUTIES OF MINORS:

ENTRY LEVEL PART TIME WORK. CASHIERING, CLERICAL, STOCKING PRODUCT, ETC.

## LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

## REGISTERED TRADE NAMES:

DOWNTOWN HARLEY-DAVIDSON  
LAWLESS HARLEY-DAVIDSON OF RENTON  
SEATTLE HARLEY-DAVIDSON

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Seattle Powersports LLC dba Lawless Harley Davidson</b>		Website	
Contact name. Primary applicant and contract manager <b>Colleen R Fain</b>	(Area code) Telephone number <b>425 988 2005</b>	Email (required) <b>cfain@lawlesshd.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>3715 E Valley rd</b>			
City <b>Benton</b>		State <b>WA</b>	ZIP code <b>98057</b>
Mailing address of business (if different) <b>same as above</b>			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) <b>U03342832</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>Buy / sell New used motorcycles. Verify registered owner status / Title status / Lienholder status</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>NO</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1/12/18 King County  
Date and place (county) signed

Lolzin R Fair  
PRINT or TYPE Name  
**X**   
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>PEH SERVICES</b>		Website <b>WWW.EYEOFWA.COM</b>	
Contact name. Primary applicant and contract manager <b>PAUL HILDEBRAND</b>	(Area code) Telephone number <b>509.833.3046</b>	Email (required) <b>PIYAKIMA@JUNO.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>5808 SUMMITVIEW AVE #A218</b>			
City <b>YAKIMA</b>		State <b>WA</b>	ZIP code <b>98908</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>603254059</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>PRIVATE INVESTIGATIONS AND SERVICE OF PROCESS. WILL USE TO IDENTIFY AND VERIFY SUBJECTS WHOM I AM ATTEMPTING TO LOCATE.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>I WILL CONTACT OWNER TO SERVE COURT PAPERS WHEN APPLICABLE. I WILL CONTACT AND PROVIDE TO ATTORNEYS ALSO WHEN APPLICABLE.</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.


**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1-11-2018 YAKIMA  
Date and place (county) signed

PAUL HILDEBRAND  
PRINT or TYPE Name  
  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





STATE OF  
WASHINGTON

# BUSINESS LICENSE

Sole Proprietorship

PAUL ERIK HILDEBRAND  
PEH SERVICES  
5808 SUMMITVIEW AVE  
YAKIMA, WA 98908-3095

Unified Business ID #: 603254059

Business ID #: 001

Location: 0001

Expires: Dec 31, 2018

PRIVATE INVESTIGATIVE AGENCY - ACTIVE

TAX REGISTRATION - ACTIVE

PRIVATE INVESTIGATIVE AGENCY PRINCIPAL: HILDERBRAND, PAULERIK

REGISTERED TRADE NAMES:

EYE OF WASHINGTON

PEH SERVICES

PRIVATE EYE OF WASHINGTON

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Seattle Auto Management, Inc.</b>		Website <b>mbseattle.com</b>	
Contact name. Primary applicant and contract manager <b>Samantha Hicks</b>	(Area code) Telephone number <b>206-467-9999</b>	Email (required) <b>samanthahicks@mbseattle.com</b>	
Contact name 2 (if applicable) <b>Janelle Markevitch</b>	(Area code) Telephone number <b>206-467-9999</b>	Email (required) <b>janellem@mbseattle.com</b>	
Physical address of business (number and street) <b>2025 Airport Way South</b>			
City <b>Seattle</b>		State <b>Wa</b>	ZIP code <b>98134</b>
Mailing address of business (if different) <b>Same as above</b>			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>New and used vehicle sales. Plate searches will be used for verifying the legal owner of a used car before allowing someone to sell or trade a vehicle to us.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>The owner would be in our business in person, so no other contact would be necessary.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

01-11-18 / SEATTLE, WA  
Date and place (county) signed

SAMANTHA R. HICKS  
PRINT or TYPE Name  
X  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Samantha Hicks</b>	Email <b>samanthahicks@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Janelle Markevitch</b>	Email <b>janellem@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Morten Bjerregaard</b>	Email <b>mortenb@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>4</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Denis Ivankin</b>	Email <b>denisivankin@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>5</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Cole Gorman</b>	Email <b>colegorman@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>6</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Blanca Dalida</b>	Email <b>blancadalida@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>7</b>	Legal business name <b>Seattle Auto Management, Inc.</b>	Contact name <b>Emily Soma</b>	Email <b>emilysoma@mbseattle.com</b>	(Area code) Phone number <b>206-467-9999</b>
	Address, City, State, Zip code <b>2025 Airport Way South, Seattle, Wa 98134</b>		Subscriber's permissible use <b>Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF  
WASHINGTON

## BUSINESS LICENSE

**Corporation**

SEATTLE AUTO MANAGEMENT, INC.  
MERCEDES BENZ OF SEATTLE  
2025 AIRPORT WAY S  
SEATTLE, WA 98134

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

Unified Business ID #: 603154792

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE

MOTOR VEHICLE DEALER #0221 - ACTIVE

**LICENSING RESTRICTIONS:**

Not licensed to hire minors without a Minor Work Permit.

**REGISTERED TRADE NAMES:**

MERCEDES BENZ OF SEATTLE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>EAN HOLDINGS LLC</b>		Website	
Contact name. Primary applicant and contract manager <b>SUSAN THAYER</b>	(Area code) Telephone number <b>503-862-5259</b>	Email (required) <b>stthayer@erac.com</b>	
Contact name 2 (if applicable) <b>CHRISTOPHER FRY</b>	(Area code) Telephone number <b>503-692-8400</b>	Email (required) <b>christopher.m.fry@ehi.com</b>	
Physical address of business (number and street) <b>8008 NE FOURTH PLAIN STE 370</b>			
City <b>VANCOUVER</b>	State <b>WA</b>	ZIP code <b>98662</b>	
Mailing address of business (if different) <b>20400 SW TETON AVE</b>			
City <b>TUALATIN</b>	State <b>OR</b>	ZIP code <b>97062</b>	
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>602901681</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>SELL AND PURCHASE VEHICLES AS WELL AS PROVIDE RENTAL CARS</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>TO NOTIFY THEM THAT A LIEN WAS PLACED ON THEIR VEHICLE AND WE COULD NOT ACCEPT THE TRADE AT THIS TIME. (BY EMAIL AND PHONE)</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1/10/17  
\_\_\_\_\_  
Date and place (county) signed

C HRISTOPHER FRY  
\_\_\_\_\_  
PRINT or TYPE Name  
  
X  
\_\_\_\_\_  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "Information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	EAN HOLDINGS LLC ALYSSE CRICKSHANK		alysse.m.crickshank@deni.com	503-862-5261
	Address, City, State, Zip code 20400 SW Teton Ave, Tualatin OR 97062		Subscriber's permissible use checking records for a ghost lien being put onto a vehicle	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	EAN HOLDINGS LLC SUSAN THAYER		sthayera@eval.com	503-862-5259
	Address, City, State, Zip code 20400 SW Teton Ave, Tualatin OR 97062		Subscriber's permissible use checking records for a ghost lien being put onto a vehicle	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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	Address, City, State, Zip code		Subscriber's permissible use	
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7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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1890-1

EAN HOLDINGS, LLC  
ENTERPRISE RENT A CAR  
20400 SW TETON AVE  
TUALATIN OR 97062-8812

DETACH BEFORE POSTING



STATE OF  
WASHINGTON

Limited Liability Company

EAN HOLDINGS, LLC  
ENTERPRISE RENT A CAR  
8008 NE FOURTH PLAIN RD STE 370  
VANCOUVER, WA 98662-7797

## BUSINESS LICENSE

Unified Business ID #: 602907681

Business ID #: 001

Location: 0103

Expires: Feb 28, 2018

UNEMPLOYMENT INSURANCE - ACTIVE  
RENTAL CAR REGISTRATION #R61338 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

## CITY ENDORSEMENTS:

VANCOUVER GENERAL BUSINESS - ACTIVE

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

## REGISTERED TRADE NAMES:

ENTERPRISE RENT A CAR

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 602907681 001 0103

Expires: Feb 28, 2018

EAN HOLDINGS, LLC  
ENTERPRISE RENT A CAR  
8008 NE FOURTH PLAIN RD STE  
370  
VANCOUVER, WA 98662-7797

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
RENTAL CAR REGISTRATION  
#R61338 - ACTIVE  
TAX REGISTRATION - ACTIVE  
VANCOUVER GENERAL BUSINESS -  
ACTIVE

gal0002

DETACH THIS SECTION FOR YOUR WALLET

Director, Department of Revenue



## Vehicle/Vessel On-line Access Contract Application-CPS

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**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Title Guaranty Company of Lewis County</b>		Website	
Contact name, Primary applicant and contract manager <b>Meri Hamre</b>	(Area code) Telephone number <b>360-748-0001</b>	Email (required) <b>meri@titlegco.com</b>	
Contact name 2 (if applicable) <b>Halie Brown</b>	(Area code) Telephone number <b>360-748-0001</b>	Email (required) <b>halie@titlegco.com</b>	
Physical address of business (number and street) <b>200 NW Pacific Ave</b>			
City <b>Chehalis</b>		State <b>WA</b>	ZIP code <b>98532</b>
Mailing address of business (if different) <b>PO Box 1304</b>			
City <b>Chehalis</b>		State <b>WA</b>	ZIP code <b>98532</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="border: 1px solid black; padding: 0 5px;">6d</span>	WA Unified Business Identifier (UBI) <b>212 002 790</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a title insurance and escrow company, insuring and closing real estate transactions (i.e. sales/purchases, refinances) in Lewis County, Washington.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We would contact the owner via phone, email or letter. In order to complete a real estate transaction and transfer ownership of mobile home, we must obtain original title and release documents and signatures from legal owners.</b></p> <p><b>NO, we do not disclose this information to any third parties that have not been disclosed to be a part of the transaction.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

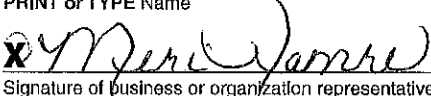
**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1-9-18, Lewis Co.  
Date and place (county) signed

Meri Hamre, Manager  
PRINT or TYPE Name  
  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

MASTER LICENSE SERVICE  
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400

## REGISTRATIONS AND LICENSES

Domestic Profit Corporation

Unified Business ID #: 212 002 790  
Business ID #: 1  
Location: 1

TITLE GUARANTY COMPANY OF LEWIS COUNTY  
TITLE GUARANTY CO OF LEWIS COUNTY  
200 NW PACIFIC AVE  
CHEHALIS WA 98532 0290

TAX REGISTRATION  
INDUSTRIAL INSURANCE  
UNEMPLOYMENT INSURANCE

**LICENSING RESTRICTIONS:**

Not licensed to hire persons under age 18 at this location.

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Elizabeth A. Luse*

Director, Department of Licensing





STATE OF  
WASHINGTON

Office of the Secretary of State  
Corporations Division

## LEGAL ENTITY REGISTRATION

TITLE GUARANTY COMPANY OF LEWIS COUNTY  
200 NW PACIFIC AVE  
CHEHALIS, WA 98532

Unified Business ID #: 212002790

Expiration: Feb-28-2018

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

Secretary of State

## Vehicle/Vessel On-line Access Contract Application-IVIPS

Use this form to apply for access to the Internet Vehicle/Vessel Information Processing System (IVIPS). Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

[ivips@dol.wa.gov](mailto:ivips@dol.wa.gov)

Print and scan or upgrade to  
**Adobe Reader XI** or above)

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Phone**

(360) 359-4001

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information or contact owners as permitted by law. There is no guarantee your request will be approved. See authorities at the bottom of page 2 of this application.

If you currently have an IVIPS number, enter it here 13a

Company/Agency name <b>BSH INC DBA BOAT COUNTRY</b>		Website <b>WWW.BOATCOUNTRY.COM</b>	
Contact name. Primary applicant and contract manager <b>SHANNON HAWLEY</b>	(Area code) Telephone number <b>(425) 259-6126</b>	Email (required) <b>shannon@boatcountry.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1871 ROSS AVE #A</b>			
City <b>EVERETT</b>		State <b>WA</b>	ZIP code <b>98201</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	WA Unified Business Identifier (UBI) <b>601736271</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>SALES OF NEW, USED &amp; CONSIGNMENT BOATS &amp; TRAILERS. VEHICLE AND VESSEL RECORDS WILL BE USED TO PROVE OWNERSHIP OF REG &amp; LEGAL OWNER FOR SALE OF BOATS AND TRAILER. ALSO USED TO SEE IF LEGAL HAS RELEASED THEIR INTEREST AFTER WE HAVE MADE PAYOFF WHEN WE ARE WAITING FOR TITLES.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>WE WILL NOT DISCLOSE OR CONTACT OWNER.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners — RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the state seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. A sample notification letter is at the DOL website: <https://fortress.wa.gov/dol/ivipsprod/ContractForms.aspx>.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties — RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**IVIPS record fees:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

09/28/2016

Date and place (county) signed

SHANNON HAWLEY

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster** (Data brokers/resellers applying for IVIPS must complete and return this section)

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or IVIPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the "Subscriber's permissible use" box, provide a specific description of why the subscriber needs access to personal information. For example, "Information is used in the processing of insurance claims investigations." A vague answer, such as, "Check who owns the vehicle," is unacceptable.

<b>1</b> Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
<b>2</b> Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
<b>3</b> Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
<b>4</b> Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

B.S.H. INC.  
BOAT COUNTRY  
1871 ROSS AVE  
EVERETT, WA 98205

Unified Business ID #: 601736271

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

UNEMPLOYMENT INSURANCE - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

TAX REGISTRATION - ACTIVE

VESSEL DEALER #8669 - ACTIVE

MISCELLANEOUS VEHICLE DEALER #6467 - ACTIVE

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

## REGISTERED TRADE NAMES:

BOAT COUNTRY

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



STATE OF  
WASHINGTON

Office of the Secretary of State  
Corporations Division

## LEGAL ENTITY REGISTRATION

B.S.H. INC.  
1871 ROSS AVE STE A  
EVERETT, WA 98201-8668

Unified Business ID #: 601736271

Expiration: Oct-31-2018

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

A handwritten signature in black ink, appearing to read "Kim Wynn", written over a horizontal line.

Secretary of State



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>JACK CARROLL'S SKAGIT HYUNDAI</b>		Website	
Contact name. Primary applicant and contract manager <b>PAM LOMSDALEN</b>	(Area code) Telephone number <b>360-757-7057</b>	Email (required) <b>pam@skagithyundai.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1313 GOLDENROD RD</b>			
City <b>BURLINGTON</b>		State <b>WA</b>	ZIP code <b>98233</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>602562604</b>

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

**NEW/USED AUTO DEALERSHIP. WE USE IVIPS TO VERIFY LEGAL AND REGISTERED OWNERS ON USED VEHICLES BEING TRADED IN TO OUR DEALERSHIP.**

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

**WE HAVE NO NEED TO DISCLOSE INFORMATION TO ANYONE OUTSIDE OF OUR COMPANY.**

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

PAM LOMSDALEN

PRINT or TYPE Name

X

Signature of business or organization representative

01/05/2018 SKAGIT

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





STATE OF  
WASHINGTON

# BUSINESS LICENSE

## Corporation

JACK CARROLL'S LINCOLN MERCURY, INC.  
JACK CARROLL'S SKAGIT HYUNDAI  
1313 GOLDENROD RD  
BURLINGTON, WA 98233-3445

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

Unified Business ID #: 602562604

Business ID #: 001

Location: 0002

Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #7800 - ACTIVE

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

## REGISTERED TRADE NAMES:

JACK CARROLL'S SKAGIT HYUNDAI

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



## Vehicle/Vessel On-line Access Contract Application-CPS

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**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

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**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here \_\_\_\_\_

13a

Company/Agency name <b>Harborstone Credit Union</b>		Website <b><a href="https://www.harborstone.com">https://www.harborstone.com</a></b>	
Contact name. Primary applicant and contract manager <b>Beverly Lizama</b>	(Area code) Telephone number <b>(253) 983-7026</b>	Email (required) <b>beverly.lizama@harborstone.com</b>	
Contact name 2 (if applicable) <b>Ruth Brooks</b>	(Area code) Telephone number <b>(253) 988-9683</b>	Email (required) <b>ruth.brooks@harborstone.com</b>	
Physical address of business (number and street) <b>9611 Gravelly Lake Dr. SW</b>			
City <b>Tacoma</b>		State <b>WA</b>	ZIP code <b>98499</b>
Mailing address of business (if different) <b>PO Box 4207</b>			
City <b>Tacoma</b>		State <b>WA</b>	ZIP code <b>98438</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601153426</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>Our primary business activity is the financing of vehicles/vessels. We will use the records pulled to verify the lien holder and registered owners for loans being issued when no title or registration is provided. Also to check for any title branding.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We will only contact the registered owner by phone or mail. We will not provide the information to any other persons or business.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Tacoma WA 1/3/2018  
Date and place (county) signed

Beverly Lizama  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

## MASTER LICENSE SERVICE

PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400

# REGISTRATIONS AND LICENSES

Unified Business ID #: 601 153 926  
Business ID #: 1  
Location: 1

HARBORSTONE CREDIT UNION  
9611 GRAVELLY LAKE DR SW  
LAKEWOOD WA 98499

INDUSTRIAL INSURANCE

UNEMPLOYMENT INSURANCE

### LICENSING RESTRICTIONS:

Not licensed to hire persons under age 18 at this location.

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Elizabeth A. Luse*

Director, Department of Licensing



**FAX**

TO:	Vehicle Records Disclosure Unit	FROM:	Clyde D Dawkins Auto Recycling
FAX:	360-570-7895	FAX:	None
PHONE:	360-359-4001	PHONE:	503-879-5676
SUBJECT:	Dawkins Renewal	DATE:	January 2, 2018
COMMENTS:			

Attached is our contract Application renewal. We finally received our current Dismantler Certificate. If we need anything else for our renewal please notify us.

Sherry Dawkins  
Clyde D Dawkins Auto Recycling  
503-879-5676

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will mail/notify and own notice that we had vehicle. that was abandon on private property. We are required to notify owner. We will not provide information to anyone.

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

Disinfectant Cans sold to Scrap yard for recycling

Provide one of these identifiers

Answer the following

Provide one of these identifiers

Employer Identification Number (EIN)

WA Unified Business Identifier (UBI)

City

State

ZIP code

Mailing address of business (if different)

City

State

ZIP code

Physical address of business (number and street)

City

State

ZIP code

Contact name 2 (if applicable)

Contact name, primary applicant and contract manager

Area code Telephone number

Area code Telephone number

Email (required)

Email (required)

Website

If you currently have a CPS number, enter it here

13a

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict disclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

Do not use this form for personal or individual record requests. Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

**Email (quickest)**  
[cps@dol.wa.gov](mailto:cps@dol.wa.gov)  
 Print and scan or upgrade to Adobe Reader XI or above to fill it in and save it.

**Mail**  
 Vehicle Records Disclosure Unit  
 Department of Licensing  
 PO Box 2957  
 Olympia, WA 98507

**Fax**  
 (360) 570-7895

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Vehicle/Vessel On-line Access  
 Contract Application-CPS**

**WASHINGTON STATE DEPARTMENT OF  
 LICENSING**

Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Date and place (county) signed 1-2-17 Yakima County, OR  
Signature of business or organization representative [Signature]  
PRINT or TYPE Name Sherry Dawkins

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

- Submit the following documentation with your application:**
- **Washington State business** – Attach a legible copy of your current business license
  - **Business outside Washington State** – Attach a legible copy of one of the following:
    - Your current business license or
    - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
  - **Non-profit organization or corporation** – Attach a legible copy of one of the following:
    - Your Articles of Incorporation, filed with the Secretary of State or
    - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
  - **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
  - **Private investigator** – Attach a legible copy of your current private investigator license.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties — RCW 46.12.640.

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners — RCW 46.12.635(1)(c).



Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

1	Legal business name	Contact name	Email	(Area code) Phone number
2	Address, City, State, Zip code	Subscriber's permissible use		
	Does the subscriber provide information to an attorney or private investigator?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code	Subscriber's permissible use		
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code	Subscriber's permissible use		
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code	Subscriber's permissible use		
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code	Subscriber's permissible use		
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code	Subscriber's permissible use		
	Does the subscriber provide information to an attorney or private investigator?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

### Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

# DISMANTLER CERTIFICATE

## WR3016

**EFFECTIVE: JANUARY 1, 2018      EXPIRES: DECEMBER 31, 2020**

**Issued To:**

**CLYDE D DAWKINS**

**DBA: CLYDE D DAWKINS AUTO RECYCLING**

**49250 SW HEBB RD**

**GRAND RONDE OR 97347**

*This business is authorized to engage in buying, selling, or dealing in vehicles for the purpose of dismantling in the state of Oregon under the provisions of ORS 822.110, and to exercise privileges granted by certificate under the provisions of ORS 822.125.*

*To be valid, this certificate must be prominently posted at the business address listed above and is not valid at any other location. It is not valid if expired, revoked, canceled or suspended, under the provisions of ORS 822.045 and ORS 822.050.*

*Driver and Motor Vehicle Services  
Department of Transportation  
Salem, OR 97314*

**\* ALTERATION, MUTILATION OR ERASURE WILL VOID CERTIFICATE \***

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here.

13a

Company/Agency name <i>Lower Columbia Longshoremen's FCU</i>		Website	
Contact name, Primary applicant and contract manager <i>Julie Brewer</i>	(Area code) Telephone number <i>360-423-2770</i>	Email (required) <i>jbrewer@lcfcu.org</i>	
Contact name 2 (if applicable) <i>Robin Carns</i>	(Area code) Telephone number <i>360-423-2770</i>	Email (required) <i>rcarns@lcfcu.org</i>	
Physical address of business (number and street) <i>629 14th Ave</i>			
City <i>Longview</i>		State <i>WA</i>	ZIP code <i>98032</i>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <i>6d</i>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>Verifying title transfers to secure the credit unions interest or release of interest in collateral securing a loan</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>We may provide the registration record to our attorney if needed due to collection of the debt secured by the vehicle in cases of default.</i></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/12/17 Cowlitz County  
Date and place (county) signed

Julie A Brewer  
PRINT or TYPE Name

X Julie A Brewer, CEO  
Signature of business or organization representative

Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



Help

My DOR

My DOR Business License Lookup LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION

License Information:

New search Previous search

Entity name: LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION  
Business name: LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION

Entity type: Corporation

UBI: 601-134-022 Business ID: 001 Location ID: 0001

Location: Open

Status: To check the status of this company, go to the link(s) below:  
Department of Revenue. This entity is not registered with Washington Secretary of State.  
Secretary of State

Location and Mailing address:

1406 CYPRESS ST  
LONGVIEW, WA, 98632

Information current as of 12/12/2017 1:10:40 PM

Contact us

Your Privacy

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**Washington State Department of Revenue  
State Business Records Database Detail**

TAX REGISTRATION NO : NON-REVENUE  
ACCOUNT OPENED : 7/26/1992  
UBI : 601134022  
ACCOUNT CLOSED : OPEN  
ENTITY NAME : LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION  
BUSINESS NAME :

ENTITY TYPE : CORPORATION  
RESELLER PERMIT NO : N/A

NAICS CODE : 999990  
NAICS DEFINITION N/A  
PERMIT EFFECTIVE: N/A  
PERMIT EXPIRES: N/A

**FOR NON-COMMERCIAL USE ONLY**

12/12/2017 1:11 PM



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**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>LIII, Inc dba Consumer Auto Liquidators</b>		Website <b>www.calcars.com</b>	
Contact name. Primary applicant and contract manager <b>Sara Calloway</b>	(Area code) Telephone number <b>509-244-2277</b>	Email (required) <b>scalloway@calcas.com</b>	
Contact name 2 (if applicable) <b>Teri Rohweder</b>	(Area code) Telephone number <b>509-244-2277</b>	Email (required) <b>teri@calcars.com</b>	
Physical address of business (number and street) <b>10828 W Sunset Hwy</b>			
City <b>Airway Heights</b>		State <b>WA</b>	ZIP code <b>99001</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Used Automotive Sales, Retail and Wholesale. CPS is used to verify ownership of vehicles, leinholder, and title status of vehicles/vessels when traded in during a retail sale or purchase.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>Information will not be disclosed to any other persons or businesses.</b></p>			

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**Submit the following documentation with your application:**

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  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Sara Calloway, Controller

PRINT or TYPE Name

12-8-17 Spokane County, WA

Date and place (county) signed

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <b>LIII, Inc.</b>	Contact name <b>Sara Calloway</b>	Email <b>scalloway@calcars.com</b>	(Area code) Phone number <b>509-244-2277</b>
	Address, City, State, Zip code <b>10828 W Sunset Hwy, Airway Heights, WA 99001</b>		Subscriber's permissible use <b>Vehicle/Vessel search to confirm ownership, leinholder and title status of vehicles/vessels traded in during a retail sale or purchase.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name <b>LIII, Inc.</b>	Contact name <b>Teri Rohweder</b>	Email <b>teri@calcars.com</b>	(Area code) Phone number <b>509-244-2277</b>
	Address, City, State, Zip code <b>10828 W Sunset Hwy, Airway Heights, WA 99001</b>		Subscriber's permissible use <b>Vehicle/Vessel search to confirm ownership, leinholder and title status of vehicles/vesels traded in during a retail sale or purchase.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

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**Vehicle/Vessel On-line Access  
Contract Application-CPS**

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PO Box 2957

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**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <i>Bruce Titus Ford, Inc. dba Bruce Titus Port Orchard Ford</i>		Website	
Contact name, Primary applicant and contract manager <i>Colleen Sandoval</i>	(Area code) Telephone number <i>(206) 830-3285</i>	Email (required) <i>colleens@brucetitus.com</i>	
Contact name 2 (if applicable) <i>Melinda Nelson</i>	(Area code) Telephone number <i>(206) 876-3000</i>	Email (required) <i>melinda.nelson@brucetitus.com</i>	
Physical address of business (number and street) <i>1215 Bay St</i>			
City <i>Port Orchard</i>		State <i>WA</i>	ZIP code <i>98366</i>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <i>602960439</i>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <i>Automotive sales + purchasing.</i></p> <p><i>Use to verify registered and legal owners on vehicles.</i></p> <p><i>Verify title status</i></p> <p><i>Verify vehicle information</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>Yes to owner if additional documents are required.</i></p> <p><i>Phone or email</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/7/17  
Date and place (county) signed

Colleen Sandoval  
PRINT or TYPE Name  
**X** *Colleen Sandoval*  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <i>Bruce Titus Ford, Inc</i>	Contact name <i>Colleen Scandola</i>	Email <i>colleen@brucetitus.com</i>	(Area code) Phone number <i>(203) 830-3725</i>
	Address, City, State, Zip code <i>1215 Bay St, Port Orchard, WA 98366</i>		Subscriber's permissible use <i>Verify registered + legal owners to collect needed documents for trade ins and purchases and refunds.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name <i>Bruce Titus Ford, Inc</i>	Contact name <i>Melinda Nelson</i>	Email <i>melinda.nelson@brucetitus.com</i>	(Area code) Phone number <i>(200) 876-3000</i>
	Address, City, State, Zip code <i>1215 Bay St, Port Orchard, WA 98366</i>		Subscriber's permissible use <i>Verify registered and legal owners to collect needed documents for trade ins, purchases and refunds.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



## Vehicle/Vessel Contract Application

Use this form to apply for access to vehicle/vessel records. Send the complete form with a copy of your business license and other required documents by fax to: **(360) 570-7895** or email (print and scan or upgrade to **Adobe Reader XI** or above) to: **vsdisclose@dol.wa.gov**.

Please allow 14 business days to process and respond to your request.

We are committed to protecting personal information and there is no guarantee you will be approved. We release records only as allowed by state and federal laws, including the Driver Privacy Protection Act (DPPA). The DPPA also restricts redisclosure of personal information you receive.

### Fees

**IVIPS contract fees:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee.

**Bulk records contract fees:** There is a 1-cent fee per record. The contractor is also responsible to pay a onetime set-up fee and monthly maintenance fee. Setup and maintenance fees may vary for bulk records.

<b>1</b> Method of access you are requesting						
<input checked="" type="checkbox"/> <b>IVIPS (Individual record inquiries)</b> – (360) 359-4001      Current IVIPS number, if applicable <b>13a</b>		<input type="checkbox"/> <b>Bulk vehicle/vessel records (Batch process)</b> – (360) 902-3673				
PRINT or TYPE Company/Agency name <b>Progressive Casualty Insurance Company</b>						
Primary contact name <b>Zechariah W, Davis IV</b>		(Area code) Telephone number <b>(503) 495-4534</b>	(Area code) Fax number <b>(503) 495-4637</b>			
Email <b>zach_davis@progressive.com</b>		Website				
Secondary contact name <b>Ross Ashdown</b>		(Area code) Telephone number <b>(503) 495-4552</b>	Email <b>ross_ashdown@progressive.co</b>			
Contract manager name <b>zechariah W, Davis IV</b>		(Area code) Telephone number <b>(503) 495-4534</b>	Email <b>zach_davis@progressive.com</b>			
Physical address of business (Number and street, City, State, ZIP code) <b>7150 SW Sandburg St, Tigard OR 97223</b>						
Mailing address of business, if different (Address or PO Box, City, State, ZIP code) <b>same as above</b>						
Provide one of these identifiers:	Tax Identification Number (TIN) <b>6d</b>	Federal Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)			
<b>2</b> Provide a detailed explanation of your primary business activity (exactly what your business does). <b>PROGRESSIVE CASUALTY INS. CO. AND ITS AFFILIATES WITHIN THE PROGRESSIVE GROUP OF INS. CO. WILL USE VEHICLE AND VESSEL LICENSE, REGISTRATION, AND TITLE INFO AND DOCUMENTATION TO VERIFY VEHICLE AND VESSEL LICENSE AND TITLE RECORDS IN CONNECTION WITH CLAIMS INVESTIGATIONS AND ANTI-FRAUD ACTIVITIES AS PERMITTED BY WRS 46.12.340, WA ADMIN CODE 208-93-067, WABX ORDER 97-01, AND THE PROFORM DRIVER, REGISTERED ACT 14 USE 2721 ET SEQ.</b>						
<b>3</b> Check all that apply to you and/or your business						
<table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Attorney  <input type="checkbox"/> Auction  <input type="checkbox"/> Auto manufacturer or agent  <input type="checkbox"/> Bail bonds  <input type="checkbox"/> Bank or financing firm  <input type="checkbox"/> Business  <input type="checkbox"/> Commercial parking company  <input type="checkbox"/> Credit union  <input type="checkbox"/> Data broker/Reseller  <input type="checkbox"/> Debt recovery/Collection  <input type="checkbox"/> Employer/Prospective employer  <input type="checkbox"/> Government  <input type="checkbox"/> Guardianship/Trustee service  <input type="checkbox"/> Homeowner association  <input type="checkbox"/> Hospital  <input type="checkbox"/> Hulk hauler  <input checked="" type="checkbox"/> Insurance company/agent                         </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Lien service  <input type="checkbox"/> Marina  <input type="checkbox"/> Neighborhood block watch  <input type="checkbox"/> Newspaper or media  <input type="checkbox"/> Non-profit organization  <input type="checkbox"/> Parking enforcement  <input type="checkbox"/> Private investigator  <input type="checkbox"/> Process server  <input type="checkbox"/> Property mgmt. - Government  <input type="checkbox"/> Property mgmt. - Private  <input type="checkbox"/> Repossession service  <input type="checkbox"/> Retail/Store  <input type="checkbox"/> School - Private  <input type="checkbox"/> School - Public  <input type="checkbox"/> Scrap processor or wrecker  <input type="checkbox"/> Security services - Government  <input type="checkbox"/> Security services - Private                         </td> <td style="vertical-align: top; width: 33%;"> <input type="checkbox"/> Service bureau for another business                          Provide business name: _____  <input type="checkbox"/> Storage facility  <input type="checkbox"/> Title/Escrow  <input type="checkbox"/> Toll facility  <input type="checkbox"/> Towing company  <input type="checkbox"/> Transporter  <input type="checkbox"/> Union (non-profit)  <input type="checkbox"/> Vehicle/Vessel dealer  <input type="checkbox"/> I represent a business that will provide information to another party                          Provide business names: _____  <input type="checkbox"/> Other (explain)                          _____                          _____                         </td> </tr> </table>				<input type="checkbox"/> Attorney <input type="checkbox"/> Auction <input type="checkbox"/> Auto manufacturer or agent <input type="checkbox"/> Bail bonds <input type="checkbox"/> Bank or financing firm <input type="checkbox"/> Business <input type="checkbox"/> Commercial parking company <input type="checkbox"/> Credit union <input type="checkbox"/> Data broker/Reseller <input type="checkbox"/> Debt recovery/Collection <input type="checkbox"/> Employer/Prospective employer <input type="checkbox"/> Government <input type="checkbox"/> Guardianship/Trustee service <input type="checkbox"/> Homeowner association <input type="checkbox"/> Hospital <input type="checkbox"/> Hulk hauler <input checked="" type="checkbox"/> Insurance company/agent	<input type="checkbox"/> Lien service <input type="checkbox"/> Marina <input type="checkbox"/> Neighborhood block watch <input type="checkbox"/> Newspaper or media <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Parking enforcement <input type="checkbox"/> Private investigator <input type="checkbox"/> Process server <input type="checkbox"/> Property mgmt. - Government <input type="checkbox"/> Property mgmt. - Private <input type="checkbox"/> Repossession service <input type="checkbox"/> Retail/Store <input type="checkbox"/> School - Private <input type="checkbox"/> School - Public <input type="checkbox"/> Scrap processor or wrecker <input type="checkbox"/> Security services - Government <input type="checkbox"/> Security services - Private	<input type="checkbox"/> Service bureau for another business Provide business name: _____ <input type="checkbox"/> Storage facility <input type="checkbox"/> Title/Escrow <input type="checkbox"/> Toll facility <input type="checkbox"/> Towing company <input type="checkbox"/> Transporter <input type="checkbox"/> Union (non-profit) <input type="checkbox"/> Vehicle/Vessel dealer <input type="checkbox"/> I represent a business that will provide information to another party Provide business names: _____ <input type="checkbox"/> Other (explain) _____ _____
<input type="checkbox"/> Attorney <input type="checkbox"/> Auction <input type="checkbox"/> Auto manufacturer or agent <input type="checkbox"/> Bail bonds <input type="checkbox"/> Bank or financing firm <input type="checkbox"/> Business <input type="checkbox"/> Commercial parking company <input type="checkbox"/> Credit union <input type="checkbox"/> Data broker/Reseller <input type="checkbox"/> Debt recovery/Collection <input type="checkbox"/> Employer/Prospective employer <input type="checkbox"/> Government <input type="checkbox"/> Guardianship/Trustee service <input type="checkbox"/> Homeowner association <input type="checkbox"/> Hospital <input type="checkbox"/> Hulk hauler <input checked="" type="checkbox"/> Insurance company/agent	<input type="checkbox"/> Lien service <input type="checkbox"/> Marina <input type="checkbox"/> Neighborhood block watch <input type="checkbox"/> Newspaper or media <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Parking enforcement <input type="checkbox"/> Private investigator <input type="checkbox"/> Process server <input type="checkbox"/> Property mgmt. - Government <input type="checkbox"/> Property mgmt. - Private <input type="checkbox"/> Repossession service <input type="checkbox"/> Retail/Store <input type="checkbox"/> School - Private <input type="checkbox"/> School - Public <input type="checkbox"/> Scrap processor or wrecker <input type="checkbox"/> Security services - Government <input type="checkbox"/> Security services - Private	<input type="checkbox"/> Service bureau for another business Provide business name: _____ <input type="checkbox"/> Storage facility <input type="checkbox"/> Title/Escrow <input type="checkbox"/> Toll facility <input type="checkbox"/> Towing company <input type="checkbox"/> Transporter <input type="checkbox"/> Union (non-profit) <input type="checkbox"/> Vehicle/Vessel dealer <input type="checkbox"/> I represent a business that will provide information to another party Provide business names: _____ <input type="checkbox"/> Other (explain) _____ _____				

**4** Explain in detail why you need vehicle/vessel information. Give examples. Attach additional pages if necessary.

Progressive Casualty Insurance company and its corporate affiliates write and service insurance policies covering vehicles and vessels.

**5** Redisclosure and/or selling of information

Will you sell or provide the information to anyone else? ..... ☐ Sell ☒ Provide ☐ No

If no, skip to Section 6.

If yes, who will you provide or sell the information?

The information will be used only for the benefits of corporate affiliates of Progressive Casualty Insurance company with the Progressive Group of insurance companies and will be disclosed to such affiliates only as necessary, usual or customary for the purpose described in Section 2 or as otherwise may be legally required.

The release and redisclosure of personal information is restricted by state and federal laws. How do you ensure recipients are entitled to personal information under these laws?

The third parties to which the information may be disclosed are corporate affiliates of Progressive Casualty Insurance Company with the group of Progressive group of insurance companies that will use the information only as described under section 2 and have the same permitted use(s) for such information as Progressive Casualty Insurance Company.

How will you provide the information to recipients? Explain.

The information may be supplied electronically, orally or in the hard copy to Progressive Casualty Insurance companies & corporate affiliates.

**6** Owner contact

Will you contact the vehicle/vessel owner? ..... ☒ Yes ☐ No

*Unsolicited business contact for commercial purposes is strictly prohibited.*

If yes, why will you contact the owner and how will you contact them?

We will cotact owners for the purpose of investigating insurance claims.

We may contact owners via telephone, mail, e-mail, text messaging, or in person.

**7** Answer the following

1. Do you agree not to sell or provide the information to any third party that has not been disclosed as part of this application? ..... ☒ Yes ☐ No
2. Do you agree not to use the information for any purpose other than reasons stated on this application? ..... ☒ Yes ☐ No
3. Do you agree not to use, or facilitate the use of, the information for commercial purpose, making unsolicited business contact, or promoting the sale of any goods or services? ..... ☒ Yes ☐ No

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12-7-17  
Date and place (county) signed

Zechariah Davis  
PRINT or TYPE Name

X Zechariah Davis  
Signature of business or organization representative

**Authorities:**

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Qualstar Credit Union</b>		Website <b>www.qualstarcu.com</b>	
Contact name. Primary applicant and contract manager <b>Deana Carver</b>	(Area code) Telephone number <b>425-460-3858</b>	Email (required) <b>deanac@qualstarcu.com</b>	
Contact name 2 (if applicable) <b>Roshalle DeArment</b>	(Area code) Telephone number <b>425-460-3847</b>	Email (required) <b>Roshalle@qualstarcu.com</b>	
Physical address of business (number and street) <b>2133 152nd Ave NE</b>			
City <b>Redmond</b>		State <b>WA</b>	ZIP code <b>98052</b>
Mailing address of business (if different) <b>PO Box 96730</b>			
City <b>Bellvue</b>		State <b>WA</b>	ZIP code <b>98009</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Credit Union offering vehicle loans, both refinance and purchases. We will use the search to verify registered and legal owners and branded titles</b></p> <p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>the owner will already be aware of the verification as they have applied for the loan and provided the VIN number</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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**Submit the following documentation with your application:**

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  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/7/17 King County  
Date and place (county) signed

Deana Carver  
PRINT or TYPE Name  
☒ Deana Carver  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



[Help](#)

**My DOR**

[My DOR](#)   [Business License Lookup](#)   [QUALSTAR CREDIT UNION](#)

**License Information:**

[New search](#)   [Previous search](#)

**Entity name:** QUALSTAR CREDIT UNION  
**Business name:** QUALSTAR CREDIT UNION  
**Entity type:** Nonprofit Corporation  
**UBI:** 601-767-208   **Business ID:** 001   **Location ID:** 0001  
**Location:** Open  
**Status:** To check the status of this company, go to the link(s) below:  
Department of Revenue  
Secretary of State

**Location address:**  
2121 152ND AVE NE  
REDMOND, WA, 98052

**Mailing address:**  
PO BOX 96730  
BELLEVUE, WA, 98009

**Governing People** May include governing people not registered with SOS

Governing people	Title
LATAWIEC, FRANK	Chairman of the Board
RELIC, JOHN C	President
STREULI, EDWARD	

3 Rows

Information current as of 12/7/2017 9:22:37 AM

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[Your Privacy](#)  
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## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)  
**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>J&amp;R AUTO SPORTS LLC</b>		Website <b>jandrautosports.com</b>	
Contact name. Primary applicant and contract manager <b>JARED I. DRAYTON</b>	(Area code) Telephone number <b>425-350-0132</b>	Email (required) <b>jandrautosports@hotmail.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>7428 EVERGREEN WAY</b>			
City <b>EVERETT</b>		State <b>WA</b>	ZIP code <b>98203</b>
Mailing address of business (if different) <b>5023 130TH PL NE</b>			
City <b>MARYSVILLE</b>		State <b>WA</b>	ZIP code <b>98271</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>603054787</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>USED VEHICLE SALES RETAIL AND WHOLESALE. VEHICLE RECORDS WILL BE ACCESSED TO VERIFY LEGAL OWNERSHIP AND TITLE STATUS PRIOR TO PURCHASE FOR RESALE.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>NO. RECORDS SEARCH FOR INTERNAL BUSINESS USE ONLY.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact **cps@dol.wa.gov** to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/6/17 SNOHOMISH COUNTY  
Date and place (county) signed

JJR AUTOSPORTS LLC  
PRINT or TYPE Name

X

Signature of business or organization representative

JARED DRAYTON, OWNER, JJR AUTOSPORTS

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



DETACH BEFORE POSTING



STATE OF  
WASHINGTON

Limited Liability Company

J&R AUTO SPORTS LLC  
7428 EVERGREEN WAY  
EVERETT, WA 98203-5664

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

## BUSINESS LICENSE

Unified Business ID #: 603054787  
Business ID #: 001  
Location: 0001  
Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #7479 - ACTIVE

### LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

A handwritten signature in cursive script that reads "Vicki Smith".

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

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Adobe Reader XI or above to fill it in  
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Vehicle Records Disclosure Unit

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PO Box 2957

Olympia, WA 98507

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Northwest Investigative Services, Inc</b>		Website <b>nwisi.com</b>	
Contact name. Primary applicant and contract manager <b>Sandra Briggs</b>	(Area code) Telephone number <b>253-631-4144 x303</b>	Email (required) <b>sandy@nwisi.com</b>	
Contact name 2 (if applicable) <b>Michael Briggs</b>	(Area code) Telephone number <b>253-631-4144 x301</b>	Email (required) <b>mike@nwisi.com</b>	
Physical address of business (number and street) <b>6403 South Island Drive E</b>			
City <b>Bonney Lake</b>		State <b>WA</b>	ZIP code <b>98391</b>
Mailing address of business (if different) <b>P O Box 8273</b>			
City <b>Bonney Lake</b>		State <b>WA</b>	ZIP code <b>98391</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) <b>602-000-642</b>

Answer the following

**Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).**

Research and locating individuals and businesses involved in litigation or in preparation of litigation; Accident investigation; HOA situation research

**Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.**

No, we do not contact owners for any purpose. Our clients (insurance companies, law offices, HOA's) may be provided some information gained from VIPS returns as needed always within Federal DPPA Laws.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

November 30, 2017 (Pierce County)

Date and place (county) signed

Sandra J. Briggs

PRINT or TYPE Name

X *Sandra J. Briggs*

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
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	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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State of Washington  
DEPARTMENT OF LICENSING  
INVESTIGATOR PROGRAM  
P O Box 9649  
Olympia, WA 98507

ADDRESS SERVICE REQUESTED

PPU 691

NORTHWEST INVEST SERVICES INC  
MICHAEL R BRIGGS  
PO BOX 7098  
COVINGTON WA 98042

STATE OF WASHINGTON

UNARMED PRIVATE INVESTIGATOR  
PRINCIPAL

NORTHWEST INVEST SERVICES INC  
MICHAEL R BRIGGS  
160 DESERT SHORES DR  
ORONDO WA 98843

1655 12/31/2017  
License Number Expiration Date

*Pat Kohler*  
Pat Kohler, Director

STATE OF WASHINGTON  
DEPARTMENT OF LICENSING - BUSINESS AND PROFESSIONS DIVISION

THIS CERTIFIES THAT THE PERSON OR BUSINESS NAMED BELOW IS AUTHORIZED AS A

UNARMED PRIVATE INVESTIGATOR  
PRINCIPAL

NORTHWEST INVEST SERVICES INC  
MICHAEL R BRIGGS  
160 DESERT SHORES DR  
ORONDO WA 98843

Licensee Released

Termination Date / /

1655

09/04/1992

12/31/2017

License Number

Issued Date

Expiration Date

*Pat Kohler*  
Pat Kohler, Director



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

NORTHWEST INVESTIGATIVE SERVICES, INC.  
27451 209TH CT SE  
MAPLE VALLEY, WA 98038-3283

Unified Business ID #: 601000642

Business ID #: 001

Location: 0001

Expires: Dec 31, 2017

PRIVATE INVESTIGATIVE AGENCY #303 - ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

PRIVATE INVESTIGATIVE AGENCY PRINCIPAL: BRIGGS, MICHAEL R

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Victor Smith*  
Director, Department of Revenue

IBI: 601000642 001 0001

NORTHWEST INVESTIGATIVE  
SERVICES, INC.  
27451 209TH CT SE  
MAPLE VALLEY, WA 98038-3283

STATE OF WASHINGTON

PRIVATE INVESTIGATIVE AGENCY  
#303 - ACTIVE  
UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

Expires: Dec 31, 2017



## Vehicle/Vessel On-line Access Contract Application-CPS

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Print and scan or upgrade to

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Vehicle Records Disclosure Unit

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PO Box 2957

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If you currently have a CPS number, enter it here **13a**

Company/Agency name <b>Curtis, Casteel and Palmer Law Group, PLLC</b>		Website <b>www.curtislaw-llc.com</b>	
Contact name. Primary applicant and contract manager <b>Stacy Bradshaw</b>	(Area code) Telephone number <b>425-409-2745</b>	Email (required) <b>sbradshaw@curtislaw-llc.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>3400 188th St SW, Ste 565</b>			
City <b>Lynnwood</b>		State <b>WA</b>	ZIP code <b>98037</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>603-419-740</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Closing escrow. We need to obtain title information for transferring mobile home titles from sellers to buyers. We also assist in the process of title eliminations.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We do contact the owner to assist in title transfers. We do not share this information with private investigators or any other persons of entities that are not listed on the IVIPs report.</p>			

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  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

11/27/17, Snohomish County

Date and place (county) signed

Stacy Bradshaw

PRINT or TYPE Name

X

Signature of business or organization representative

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<b>1</b>	Legal business name Curtis, Casteel & Palmer Law	Contact name	Email sbradshaw@curtislaw-llc.com	(Area code) Phone number 425-409-2745
	Address, City, State, Zip code 3400 188th St SW, Ste 565, Lynnwood, WA 98037		Subscriber's permissible use Information is used to assist in transferring title and assisting with title eliminations	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.





STATE OF  
WASHINGTON

# BUSINESS LICENSE

Domestic Professional Limited Liability Company

Unified Business ID #: 603 419 740  
Business ID #: 1  
Location: 1

CURTIS & CASTEEL LAW GROUP, PLLC  
3400 188TH ST SW STE 565  
LYNNWOOD WA 98037 4773

TAX REGISTRATION  
INDUSTRIAL INSURANCE  
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vicki Smith*  
Director, Department of Revenue

STATE OF WASHINGTON

EXPIRATION DATE

10 1 1

TEEL LAW GROUP, PLLC  
T SW STE 565  
98037 4773

TION  
NSURANCE  
INSURANCE

*Smith*  
Department of Revenue

SECTION FOR YOUR WALLET

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Jonathan Smith, P.S. dba Advantage Legal Group</b>		Website <b>www.advantagelegalgroup.com</b>	
Contact name. Primary applicant and contract manager <b>Jonathan Smith</b>	(Area code) Telephone number <b>425-452-9797</b>	Email (required) <b>jonathan@advantagelegalgroup.com</b>	
Contact name 2 (if applicable) <b>Don Knox</b>	(Area code) Telephone number <b>425-452-9797</b>	Email (required) <b>don@advantagelegalgroup.com</b>	
Physical address of business (number and street) <b>12207 NE 8th Street</b>			
City <b>Bellevue</b>		State <b>WA</b>	ZIP code <b>98005</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Personal injury attorney. Used to track down defendant's address and identity from license plate number.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>Used to identify owners of vehicles. May include service of process by this law firm or contact for witness statements.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Jonathan Smith

PRINT or TYPE Name

11/14/17, KING COUNTY, WA

Date and place (county) signed

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)  
**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_ **13a** \_\_\_\_\_

Company/Agency name <b>Northwest Honda</b>		Website <b>www.northwesthonda.com</b>	
Contact name. Primary applicant and contract manager <b>Sue Metcalf</b>	(Area code) Telephone number <b>(360) 676-2277</b>	Email (required) <b>Sue@northwesthonda.com</b>	
Contact name 2 (if applicable) <b>Kelly Tiffany</b>	(Area code) Telephone number <b>(360) 676-2277</b>	Email (required) <b>kelly@northwesthonda.com</b>	
Physical address of business (number and street) <b>2010 Iowa St</b>			
City <b>Bellingham</b>		State <b>WA</b>	ZIP code <b>98229</b>
Mailing address of business (if different) <b>Same</b>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We buy and sell new and used cars. We will search to confirm registered owner + lienholder information.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>The only circumstance when we would share information is when wholesale selling a car with only an affidavit and not a physical title.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Sue Metcalf

PRINT or TYPE Name

12/11/17 Bellingham, WA

Date and place (county) signed

X Sue Metcalf

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

NWH, INC.  
NORTHWEST HONDA  
2010 IOWA ST  
BELLINGHAM, WA 98229-4726

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
MOTOR VEHICLE DEALER #2313 - ACTIVE

Unified Business ID #: 601826456

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

## CITY ENDORSEMENTS:

BELLINGHAM GENERAL BUSINESS #022535 - ACTIVE

## DUTIES OF MINORS:

WASH CARS, CLEAN LOT

## LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

The regular driving of motor vehicles by minors is prohibited. WAC 296-125-030(2)

## REGISTERED TRADE NAMES:

NWH, INC. DBA NORTHWEST HONDA  
NWH, INC. DBA NORTHWEST HONDA

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 601826456 001 0001

STATE OF WASHINGTON

Expires: Oct 31, 2018

NWH, INC.  
NORTHWEST HONDA  
2010 IOWA ST  
BELLINGHAM, WA 98229-4726

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #2313 -  
ACTIVE  
BELLINGHAM GENERAL BUSINESS  
#022535 - ACTIVE

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

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Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
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**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here

13a

Company/Agency name <b>ESPY INVESTIGATIONS</b>		Website <b>www.Espyinvestigations.com</b>	
Contact name. Primary applicant and contract manager <b>RUBY DALY</b>	(Area code) Telephone number <b>(425) 785-4030</b>	Email (required) <b>RUBY@ESPYINVESTIGATIONS.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>227 BELLEVUE WAY NE PMB 265</b>			
City <b>BELLEVUE</b>		State <b>WA</b>	ZIP code <b>98004</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>603 174 588</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>I conduct research and verification information primarily for the purpose of working with attorneys in preparation for court cases that are going to trial. Process service, background information, locating correct address information and verification for owned vehicles to aid in my investigation.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I will use this information to aid in my investigation to assist in proper address verification to submit documents. I would not have any purpose of contacting the registered owner and disclosing this information. I would utilize this information to assist in verification of ownership of vehicle and or address verification.</p>			



## Vehicle/Vessel On-line Access Contract Application-CPS

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cps@dol.wa.gov

Print and scan or upgrade to

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Vehicle Records Disclosure Unit

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PO Box 2957

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(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <i>Chae Inc dba: Acura of Seattle</i>		Website <i>www.acuraofseattle.com</i>	
Contact name, Primary applicant and contract manager <i>Julie A. Sato</i>	(Area code) Telephone number <i>(206) 433-1000</i>	Email (required) <i>jsato@acuraofseattle.com</i>	
Contact name 2 (if applicable) <i>Kevin Burton</i>	(Area code) Telephone number <i>(206) 433-1000</i>	Email (required) <i>kburton@acuraofseattle.com</i>	
Physical address of business (number and street) <i>301 Baker Blvd</i>			
City <i>Seattle</i>		State <i>WA</i>	ZIP code <i>98188</i>
Mailing address of business (if different) <i>same as above</i>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <i>New and used vehicle sales</i> <i>Service and parts sales.</i> <i>* Verify legal owner on trade-ins or used vehicle purchase.</i>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <i>We may possibly contact the owner.</i> <i>By phone or email.</i> <i>If applicable we may need to verify any discrepancies on the customers transaction.</i>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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**Submit the following documentation with your application:**

- ✓ • **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

02.16.18 King County  
Date and place (county) signed

Julie A. Sato  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

CHAE, INC.  
ACURA OF SEATTLE  
301 BAKER BLVD  
SEATTLE, WA 98188

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
MOTOR VEHICLE DEALER #2490 - ACTIVE

Unified Business ID #: 600609521  
Business ID #: 001  
Location: 0001  
Expires: Jan 31, 2019

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

DUTIES OF MINORS:  
FILING PAPERWORK.

## LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Service occupations: if a minor works past 8:00 p.m., minor must be supervised by a responsible adult employee who is on the premises at all times. WAC 296-125-030(30)

## REGISTERED TRADE NAMES:

ACURA OF SEATTLE  
OAG  
O'BRIEN AUTO GROUP

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 600609521 001 0001

Expires: Jan 31, 2019

CHAE, INC.  
ACURA OF SEATTLE  
301 BAKER BLVD  
SEATTLE, WA 98188

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #2490 -  
ACTIVE

# Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>doggett autobrokers</b>		Website	
Contact name. Primary applicant and contract manager <b>william doggett</b>	(Area code) Telephone number <b>2069303382</b>	Email (required) <b>doggett47@gmail.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>120 s spokane st</b>			
City <b>seattle</b>		State <b>wa</b>	ZIP code <b>98134</b>
Mailing address of business (if different) <b>27715 212th pl se</b>			
City <b>maple valley</b>		State <b>wa</b>	ZIP code <b>98038</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) <b>604147719</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>we sell cars and take cars in on trade and obtain bank financing for customers and pay off some of the trades and buy cars at auction and some customers like to sell their cars to us</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I will not contact anyone in regards to the info that i receive its for information to me to decide whether or not i will buy a car from such person in front of me and it will help me determine whether or not if a car has a payoff and and the owner tells me something different standing in front of me. I will not call or discuss this info with anybody <b>ONLY FOR INFORMATION PURPOSE ONLY</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/22/17 King  
Date and place (county) signed

William Doggett Doggett Autobrokers  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

DETACH BEFORE POSTING



STATE OF  
WASHINGTON

Limited Liability Company

## BUSINESS LICENSE

KATHERINE 77 AUTOLOANS, LLC  
DOGGETT AUTOBROKERS  
120 S SPOKANE ST  
SEATTLE, WA 98134-2221

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

Unified Business ID #: 604147719  
Business ID #: 001  
Location: 0001  
Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #10891 - ACTIVE

### LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

### REGISTERED TRADE NAMES:

DOGGETT AUTOBROKERS

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 604147719 001 0001

KATHERINE 77 AUTOLOANS, LLC  
DOGGETT AUTOBROKERS  
120 S SPOKANE ST  
SEATTLE, WA 98134-2221

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #10891 -  
ACTIVE

STATE OF WASHINGTON

Expires: Dec 31, 2018

Director, Department of Revenue

DETACH THIS SECTION FOR YOUR WALLET



## Vehicle/Vessel On-line Access Contract Application-CPS

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**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>MCCURLEY INTEGRITY HONDA</b>		Website <b>www.billmccurley.com</b>	
Contact name. Primary applicant and contract manager <b>KIMBERLY CARLSON</b>	(Area code) Telephone number <b>(509)374-2644</b>	Email (required) <b>kimberly.carlson@mccurley.net</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1775 FOWLER ST</b>			
City <b>RICHLAND</b>		State <b>WA</b>	ZIP code <b>99352</b>
Mailing address of business (if different) <b>PO BOX 2698</b>			
City <b>PASCO</b>		State <b>WA</b>	ZIP code <b>99301</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>602-876-198</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a new and used automobile dealership. We use vehicle records to verify legal owners of vehicles and verification of lien holder information on vehicles traded into us.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The owner will be in the office at the time this information is looked up. No other person will be given this information</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Kimberly Carlson

PRINT or TYPE Name

X

Signature of business or organization representative

12/07/2017

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name MCCURLEY INTEGRITY H	Contact name CHAD VAUGHN	Email CHAD.VAUGHN@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name MCCURLEY INTEGRITY H	Contact name SCOTT HARVEY	Email SCOTT.HARVEY@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name MCCURLEY INTEGRITY H	Contact name JAVIER CASTRO	Email JAVIER.CASTRO@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



4710-1

MCCURLEY INTEGRITY AUTO, L.L.C.  
MCCURLEY INTEGRITY HONDA  
PO BOX 2698  
PASCO WA 99302-2698

DETACH BEFORE POSTING



STATE OF  
WASHINGTON

## BUSINESS LICENSE

Limited Liability Company

MCCURLEY INTEGRITY AUTO, L.L.C.  
MCCURLEY INTEGRITY HONDA  
1775 FOWLER ST  
RICHLAND, WA 99352-4807

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
MOTOR VEHICLE DEALER #0111 - ACTIVE

Unified Business ID #: 602876198  
Business ID #: 001  
Location: 0001  
Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

### CITY ENDORSEMENTS:

RICHLAND SERVICE BUSINESS #F06000 - ACTIVE

### DUTIES OF MINORS:

WASHING & MOVING VEHICLES, FILING, FAXING, PHOTOCOPYING. \*SERVICE OCCUPATIONS: IF A MINOR WORKS PAST 8:00 P.M.: MINOR MUST BE SUPERVISED BY A RESPONSIBLE ADULT EMPLOYEE WHO MUST REMAIN ON PREMISE AT ALL TIMES.\*

### LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

The regular driving of motor vehicles by minors is prohibited. WAC 296-125-030(2)

### REGISTERED TRADE NAMES:

MCCURLEY INTEGRITY HONDA

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Director, Department of Revenue

UBI: 602876198 001 0001

MCCURLEY INTEGRITY AUTO,  
L.L.C.  
MCCURLEY INTEGRITY HONDA  
1775 FOWLER ST  
RICHLAND, WA 99352-4807

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
TAX REGISTRATION - ACTIVE  
MOTOR VEHICLE DEALER #0111 -  
ACTIVE  
RICHLAND SERVICE BUSINESS  
#F06000 - ACTIVE

Expires: Oct 31, 2018

gaL0002

Director, Department of Revenue

DETACH THIS SECTION FOR YOUR WALLET



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

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Print and scan or upgrade to

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**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

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Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here

13a

Company/Agency name <i>OnPoint Community Credit Union</i>		Website <i>www.onpointcu.com</i>	
Contact name, Primary applicant and contract manager <i>Donna Gregus</i>	(Area code) Telephone number <i>503-273-2680</i>	Email (required) <i>donna.gregus@onpointcu.com</i>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <i>2701 NW Vaughn St Ste#800</i>			
City <i>Portland</i>		State <i>OR</i>	ZIP code <i>97210</i>
Mailing address of business (if different) <i>P.O. Box 3750</i>			
City <i>Portland</i>		State <i>OR</i>	ZIP code <i>97208</i>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <i>6d</i>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>We are a Financial Lender. We need access to vehicle records for current owner and/or Lien Holder information.</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>If we need documents signed by the owner of record, we will need to complete the form(s) and mail to the owner(s)</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

2-16-18 Portland, OR  
Date and place (county) signed

Donna Gregus ONPOINT COMMUNITY CREDIT UNION  
PRINT or TYPE Name  
X Donna Gregus ONPOINT COMMUNITY CREDIT UNION  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



DEPARTMENT OF CONSUMER AND BUSINESS SERVICES  
DIVISION OF FINANCE AND CORPORATE SECURITIES

CERTIFICATE OF APPROVAL

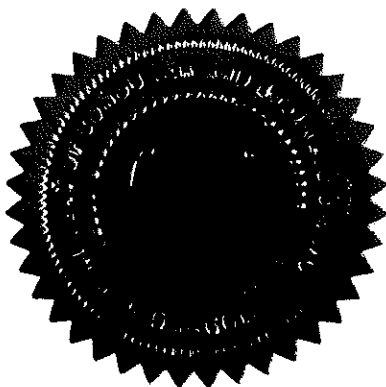
PORTLAND TEACHERS CREDIT UNION filed amendments to the Organization Certificate and to the Bylaws.

The amended Organization Certificate and Bylaws were approved on November 7, 2005.

Now, THEREFORE, I authorize

ONPOINT COMMUNITY CREDIT UNION

to transact business as a community credit union within this State in accordance with its Bylaws and the laws of the State of Oregon, starting on January 1, 2006.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed hereto the Seal of the Department of Consumer and Business Services of the State of Oregon at Salem, Oregon, this 7<sup>TH</sup> day of November 2005.

  
David Tatman, Acting Administrator



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

**13a**

Company/Agency name <b>Cowlitz County Title Company</b>		Website <b>www.cowlitztitle.com</b>	
Contact name. Primary applicant and contract manager <b>Bianca Lemmons</b>	(Area code) Telephone number <b>360-423-5330</b>	Email (required) <b>bianca@cowlitztitle.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1159 14th Avenue</b>			
City <b>Longview</b>		State <b>Washington</b>	ZIP code <b>98632</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We handle real estate transactions in which we act as a title transfer and escrow closing agent for the sale of mobile homes, along with personal property, therefore we utilize this system to verify ownership/lienholder, etc. to accommodate real estate closings for seller's, buyer's and lender's.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information is confidential and will not be disclosed. There are times when we must contact the registered owner or lien holder in order to accommodate the sale or title clearing of the particular mobile home in which we've been asked to handle a sale or refinance closing on, but no information is provided to any outside party.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Bianca Lemmons, Vice President/Manager

PRINT or TYPE Name

X 

Signature of business or organization representative

2/14/2018

Date and place (county) signed

**Authorities:**

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON  
Corporation

# BUSINESS LICENSE

Unified Business ID #: 600464147  
Business ID #: 001  
Location: 0001  
Expires: Nov 30, 2018

COWLITZ COUNTY TITLE CO.  
COWLITZ COUNTY TITLE CO  
1159 14TH AVE  
LONGVIEW, WA 98632

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

## CITY ENDORSEMENTS:

LONGVIEW GENERAL BUSINESS #169125 - ACTIVE

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

*Vikki Smith*

Director, Department of Revenue

UBI: 600464147 001 0001

COWLITZ COUNTY TITLE CO.  
COWLITZ COUNTY TITLE CO  
1159 14TH AVE  
LONGVIEW, WA 98632

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -  
ACTIVE  
INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE  
LONGVIEW GENERAL BUSINESS  
#169125 - ACTIVE

Expires: Nov 30, 2018

## Vehicle/Vessel On-line Access Contract Application-CPS

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**cps@dol.wa.gov**

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**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>Progressions Credit Union</b>		Website <b>progressionscu.org</b>	
Contact name. Primary applicant and contract manager <b>Nanette Edgett-Janssen</b>	(Area code) Telephone number <b>509-444-0473</b>	Email (required) <b>nanettee@progressionscu.org</b>	
Contact name 2 (if applicable) <b>Mari Zumbiel</b>	(Area code) Telephone number <b>509-622-2019</b>	Email (required) <b>mariz@progressionscu.org</b>	
Physical address of business (number and street) <b>2919 E Mission Ave</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99202</b>
Mailing address of business (if different) <b>2919 E Mission Ave</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99202</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	WA Unified Business Identifier (UBI) <b>601133758</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a financial institution that provides savings and lending (including vehicle and vessel loans) to our members.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We will not use this information to contact owners nor will we disclose any information from the records. This information will only be used to verify current ownership for lending purposes and to verify we have been added as legal owner when the vehicle is used as collateral for a loan.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Nanette Edgett-Janssen

PRINT or TYPE Name

X

Signature of business or organization representative

12/28/2017 Spokane WA

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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Vehicle Records Disclosure Unit

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If you currently have a CPS number, enter it here

13a

Company/Agency name <b>JAGUAR LAND ROVER BELLEVUE INC</b>		Website <b>jaguarbellevue.com</b>	
Contact name. Primary applicant and contract manager <b>CRYSTAL HALLEN</b>	(Area code) Telephone number <b>(425)373-9222</b>	Email (required) <b>crystal.hallen@autocenternw.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>13817 NE 20TH ST</b>			
City <b>BELLEVUE</b>		State <b>WA</b>	ZIP code <b>98005</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <b>NEW AND USED AUTO SALES AND SERVICE</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  <b>WE WILL NOT CONTACT THE OWNER OR ANYONE ELSE OR DISCLOSE INFORMATION FROM THE CONTRACTED PLATE SEARCHES.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Articles of Incorporation, filed with the Secretary of State or
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- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

CRYSTAL HALLEN

PRINT or TYPE Name

X

Signature of business or organization representative

12/8/17 BELLEVUE, WA

Date and place (county) signed

**Authorities:**

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>UNITED FINANCE INDUSTRIAL LOAN CO.</b>		Website <b>UNITED FINANCE.COM</b>	
Contact name. Primary applicant and contract manager <b>DATRICK HENNESSEY</b>	(Area code) Telephone number <b>360-425-3333</b>	Email (required) <b>LONGVIEW@UNITEDFINANCE.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1070 14TH AVE</b>			
City <b>LONGVIEW</b>		State <b>WA</b>	ZIP code <b>98632</b>
Mailing address of business (if different) <b>PO BOX 207</b>			
City <b>LONGVIEW</b>		State <b>WA</b>	ZIP code <b>98632</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>WE WILL BE TRACKING LIEN PERFECTION REGARDING OUR COLLATERAL, GETTING UPDATED CUSTOMER/VEHICLE INFORMATION WHEN POSSIBLE (I.E. SHIP TRACE), PRINTING REGISTRATIONS</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>WE WILL BE LOOKING AT OUR CUSTOMERS INFORMATION. WE WILL BE CONTACTING THEM IN REGARD TO THEIR ACCOUNT OR ITS RELATED INFORMATION. WE WILL NOT DISCUSS THEIR INFORMATION WITH A THIRD PARTY WITHOUT THEIR AUTHORIZATION TO DO SO.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private Investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

COWLITZ 11-14-2017 DATEICH HENNESSEY  
Date and place (county) signed PRINT OF TYPE Name Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

# BUSINESS LICENSE

Corporation

UNITED FINANCE CO.  
UNITEDFINANCEINDUSTRIALLOANCOMPANY  
1070 14TH AVE  
LONGVIEW, WA 98632

TAX REGISTRATION - ACTIVE

Unified Business ID #: 409012143  
Business ID #: 001  
Location: 0001  
Expires: Oct 31, 2018

**CITY ENDORSEMENTS:**

LONGVIEW GENERAL BUSINESS #818670 - ACTIVE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 409012143 001 0001

Expires: Oct 31, 2018

UNITED FINANCE CO.  
UNITEDFINANCEINDUSTRIALLOAN  
COMPANY  
1070 14TH AVE  
LONGVIEW, WA 98632

TAX REGISTRATION - ACTIVE  
LONGVIEW GENERAL BUSINESS  
#818670 - ACTIVE

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name <b>Strategic Intelligence Services, LLC</b>		Website <b>www.strategicintel.com</b>	
Contact name. Primary applicant and contract manager <b>Thomas E. Stotts</b>	(Area code) Telephone number <b>(509)230-6176</b>	Email (required) <b>tom@strategicintel.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1312 N. Monroe St., Ste 254</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99201</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) <b>602-139-622</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>Private Investigations and Service of Process. I will utilize vehicle registration information to locate and identify persons and vehicles for Litigation or service of process.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>I may contact owners for litigation purposes and service of process only. I may provide registration information to attorneys for permissible legal purposes.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Tom E. Stotts

PRINT or TYPE Name

X

Signature of business or organization representative

11/09/2017 Spokane, WA

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <b>Strategic Intelligences Services, LLC</b>	Contact name <b>Tom Stotts</b>	Email <b>tom@strategicintel.com</b>	(Area code) Phone number <b>5092306176</b>
	Address, City, State, Zip code <b>1312 N. Monroe St., Ste 245, Spokane, WA 99201</b>		Subscriber's permissible use <b>Legal investigations an service of process.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.**



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the Internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in.

and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>PROGRESSIVE CASUALTY INSURANCE COMPANY</b>		Website	
Contact name: Primary applicant and contract manager <b>BRIAN ANDERSON</b>		Area code Telephone number <b>(253) 733-4259</b>	Email (required) <b>brian.anderson@progressive.com</b>
Contract name 2 (if applicable)		Area code Telephone number	Email (required)
Physical address of business (number and street) <b>34001 PACIFIC HIGHWAY S</b>			
City <b>FEDERAL WAY</b>		State <b>WA</b>	ZIP code <b>98003</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Limited Business Identifier (LBI)
Answer the following: Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>PROGRESSIVE CASUALTY INSURANCE COMPANY AND ITS CORPORATE AFFILIATES WRITE AND SERVICE INSURANCE POLICIES COVERING VEHICLES AND VESSELS.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>YES, WE WILL CONTACT OWNERS FOR THE PURPOSE OF INVESTIGATING INSURANCE CLAIMS. WE MAY CONTACT THE OWNERS BY MAIL, EMAIL, TELEPHONE OR IN PERSON.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties—RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
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  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1/17/2018  
Date and place (county) signed

BRIAN ANDERSON  
PRINT or TYPE Name

X   
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**From:** [Loosen, Jim \(DOL\)](#)  
**To:** [lori@parkingenforce.com](mailto:lori@parkingenforce.com)  
**Cc:** [DOL DRIVES ASD Contracted Plate Search](#)  
**Subject:** Contracted Plate Search - Application for access to Washington vehicle registration records  
**Date:** Tuesday, January 09, 2018 12:28:14 PM

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Lori A Robertson  
Parking Compliance Enforcement  
3883 SE 8<sup>th</sup> Ave, Ste 250,  
POB 4727  
Portland OR 97208

Dear Lori,

Thank you for your application received 1/8/2018 and presently under consideration for renewal.

At your very earliest convenience, please provide to this office a description of the enforcement process, the debt collection process, how the DOL records are used in these processes, and how your company meets compliance with the conditions imposed by the Federal Driver Privacy Protection Act of 1994, 18 USC §2721 (b)(3)(A)(B).

I have been provided a copy of a Parking Penalty Notice issued by your company to a Washington licensed vehicle at a Vancouver, Washington address. Wording on the notice states "Authorized by contract with Property Management".

At your very earliest convenience, please provide to this office a detailed list of the names, addresses, and contact information, as well as copies of the contracts you hold with all of the customers contracting for the parking enforcement services provided by your company, and example copies of the front and back sides of the initial penalty notices or infraction notices and any secondary or follow-up correspondence or forms that may be issued by your company to the recipient of the parking penalty notice.

I await your advice.

Respectfully  
Jim Loosen  
Washington Department of Licensing  
Vehicle Vessel Records Disclosure and CPS Units Supervisor  
360-359-4012  
[jloosen@dol.wa.gov](mailto:jloosen@dol.wa.gov)  
POB 2957, OLYMPIA WA 98507  
6A to 3P weekdays

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

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Print and scan or upgrade to

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and save it.

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Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here \_\_\_\_\_ **13a** \_\_\_\_\_

Company/Agency name <b>WSECU</b>		Website	
Contact name. Primary applicant and contract manager <b>Rochelle Clausnitzer</b>	(Area code) Telephone number <b>800-893-7689</b>	Email (required) <b>rclausnitzer@wsecu.org</b>	
Contact name 2 (if applicable) <b>Melissa Ruiz</b>	(Area code) Telephone number <b>800-562-0999</b>	Email (required) <b>mruiz@wsecu.org</b>	
Physical address of business (number and street) <b>330 Union Ave SE</b>			
City <b>Olympia</b>		State <b>WA</b>	ZIP code <b>98501</b>
Mailing address of business (if different) <b>PO BOX WSECU</b>			
City <b>Olympia</b>		State <b>WA</b>	ZIP code <b>98507</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>See attached</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>See attached</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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**Submit the following documentation with your application:**

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Rochelle Clausnitzer

PRINT or TYPE Name

December 7, 2017

Date and place (county) signed

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
*Revised Code of Washington* (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



## **Vehicle/Vessel Disclosure Agreement Application**

### **Section 3**

#### **Why do you need vehicle/vessel information?**

- Look up license plate numbers
- Verify VIN Numbers
- Verify registered and legal owner information
- Verify title number
- Look up mailing date of title
- Check for when tabs expire(d) and try to locate our member through address on file.

### **Section 4**

#### **Explain exactly what your business does.**

- We assist membership on the phone asking when they will receive their titles that were released by WSECU. We verify the title was sent or being sent to the correct address and that WSECU is no longer on the title.
- We work reports on outstanding titles not securing a loan, to know whom to contact to change the title to WSECU as the legal owner.
- We lookup by plate number or VIN # to verify our information is correct. Such as a VIN error report.
- Look up to verify title number on the current record @ DOL. This is used when filling out title forms and requesting title numbers.
- All the information received thru IVIPS will be used to assist with daily transactions, reports and assisting our member ship by phone and mail.
- We periodically pull VIPS to verify information regarding a repossession.

### **Section 5**

#### **Will you re-disclose or sell the information to anyone else? No**

# IVIPS Use and Disclosure Contract

## Attachment B

### User/Access Request

**It is the Contractor's responsibility to:**

- a. Read and review the IVIPS Use and Disclosure Contract with each employee listed
- b. Instruct employees not to disclose or share User Sub-Account numbers and passwords and
- c. Notify DOL in writing within 3 business days of any changes to the Contact information (i.e. business owner, business address, phone number, Contract Contact, employee eligibility or if an employee with access leaves employment).

**Failure to comply with the above may result in immediate access termination or termination of this Contract.**

TYPE or PRINT Business name <b>WSECU</b>	IVIPS account number <b>13a</b>
---	------------------------------------

1. TYPE or PRINT Employee name <b>Rochelle Clausnitzer</b>	User sub-account number <b>13a</b>
2. Employee name <b>Kris Uren</b>	User sub-account number <b>13a</b>
3. Employee name <b>Angela McKenzic</b>	User sub-account number <b>13a</b>
4. Employee name <b>Danette Maloney</b>	User sub-account number <b>13a</b>
5. Employee name <b>Kristi Holien</b>	User sub-account number <b>13a</b>
6. Employee name <b>Lisa Stalker</b>	User sub-account number <b>13a</b>
7. Employee name <b>Linda Davis</b>	User sub-account number <b>13a</b>
8. Employee name <b>Linda Liu</b>	User sub-account number <b>13a</b>
9. Employee name <b>Melissa Ruiz</b>	User sub-account number <b>13a</b>
10. Employee name <b>Jessica Robinson (formerly Jones)</b>	User sub-account number <b>13a</b>
11. Employee name <b>Steve Snyder</b>	User sub-account number <b>13a</b>
12. Employee name <b>Trina Novlan</b>	User sub-account number <b>13a</b>
13. Employee name <b>Rachel Clark</b>	User sub-account number <b>13a</b>
14. Employee name <b>Sean Ledgerwood</b>	User sub-account number <b>13a</b>
15. Employee name <b>Jamie Raines</b>	User sub-account number <b>13a</b>
16. Employee name <b>Charene Sheaffer</b>	User sub-account number <b>13a</b>
17. Employee name <b>Nikki Penney</b>	User sub-account number <b>13a</b>
18. Employee name <b>Marissa Carpentier</b>	User sub-account number <b>13a</b>
19. Employee name <b>Cheryl Smith</b>	User sub-account number <b>13a</b>
20. Employee name <b>Jocitta Fahey</b>	User sub-account number <b>13a</b>

**This form may be duplicated.**

*We are committed to providing equal access to our services.  
If you need accommodation, please call (360) 359-4001 or TTY (360) 664-0116.*



STATE OF  
WASHINGTON

## BUSINESS LICENSE

Unified Business ID #: 601 133 130  
Business ID #: 1

WASHINGTON STATE EMPLOYEES CREDIT UNION

REGISTERED TRADE NAMES:  
WSECU INVESTMENT MANAGEMENT  
WSECU INSURANCE SERVICES

COPY

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

**From:** [Loosen, Jim \(DOL\)](#)  
**To:** [lori@parkingenforce.com](mailto:lori@parkingenforce.com)  
**Cc:** [DOL DRIVES ASD Contracted Plate Search](#)  
**Subject:** Contracted Plate Search - Application for access to Washington vehicle registration records  
**Date:** Tuesday, January 09, 2018 12:28:14 PM

---

Lori A Robertson  
Parking Compliance Enforcement  
3883 SE 8<sup>th</sup> Ave, Ste 250,  
POB 4727  
Portland OR 97208

Dear Lori,

Thank you for your application received 1/8/2018 and presently under consideration for renewal.

At your very earliest convenience, please provide to this office a description of the enforcement process, the debt collection process, how the DOL records are used in these processes, and how your company meets compliance with the conditions imposed by the Federal Driver Privacy Protection Act of 1994, 18 USC §2721 (b)(3)(A)(B).

I have been provided a copy of a Parking Penalty Notice issued by your company to a Washington licensed vehicle at a Vancouver, Washington address. Wording on the notice states "Authorized by contract with Property Management".

At your very earliest convenience, please provide to this office a detailed list of the names, addresses, and contact information, as well as copies of the contracts you hold with all of the customers contracting for the parking enforcement services provided by your company, and example copies of the front and back sides of the initial penalty notices or infraction notices and any secondary or follow-up correspondence or forms that may be issued by your company to the recipient of the parking penalty notice.

I await your advice.

Respectfully  
Jim Loosen  
Washington Department of Licensing  
Vehicle Vessel Records Disclosure and CPS Units Supervisor  
360-359-4012  
[jloosen@dol.wa.gov](mailto:jloosen@dol.wa.gov)  
POB 2957, OLYMPIA WA 98507  
6A to 3P weekdays



**From:** [Nanette Edgett-Janssen](#)  
**To:** [DOL DRIVES ASD Contracted Plate Search](#)  
**Subject:** Vehicle/Vessel Online Access Application  
**Date:** Thursday, December 28, 2017 12:46:46 PM  
**Attachments:** [20171228124725134.pdf](#)

---

Attached is our application to renew our online access for vehicle/vessel lookups. Please let me know if there is anything else we need to complete.

Sincerely,

Nanette Edgett-Janssen  
Operations Supervisor  
Progressions Credit Union  
Direct: (509) 444-0473  
Toll Free: (800) 828-8691 ext 233



Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>Progressions Credit Union</b>		Website <b>progressionscu.org</b>	
Contact name. Primary applicant and contract manager <b>Nanette Edgett-Janssen</b>	(Area code) Telephone number <b>509-444-0473</b>	Email (required) <b>nanettee@progressionscu.org</b>	
Contact name 2 (if applicable) <b>Mari Zumbiel</b>	(Area code) Telephone number <b>509-622-2019</b>	Email (required) <b>mariz@progressionscu.org</b>	
Physical address of business (number and street) <b>2919 E Mission Ave</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99202</b>
Mailing address of business (if different) <b>2919 E Mission Ave</b>			
City <b>Spokane</b>		State <b>WA</b>	ZIP code <b>99202</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	WA Unified Business Identifier (UBI) <b>601133758</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a financial institution that provides savings and lending (including vehicle and vessel loans) to our members.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We will not use this information to contact owners nor will we disclose any information from the records. This information will only be used to verify current ownership for lending purposes and to verify we have been added as legal owner when the vehicle is used as collateral for a loan.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Nanette Edgett-Janssen

PRINT or TYPE Name

X

Signature of business or organization representative

12/28/2017 Spokane WA

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>NORTH SOUND AUTO GROUP, LLC dba DWAYNE LANE'S CJDR</b>		Website <b>WWW.DWAYNELANE.COM</b>	
Contact name, Primary applicant and contract manager <b>SHANTEL HARRIS</b>	(Area code) Telephone number <b>(425) 551-5406</b>	Email (required) <b>SHARRIS@DWAYNELANE.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>10515 EVERGREEN WAY</b>			
City <b>EVERETT</b>		State <b>WA</b>	ZIP code <b>98204</b>
Mailing address of business (if different) <b>SAME AS ABOVE</b>			
City		State	ZIP code
<b>Provide one of these identifiers</b>	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	WA Unified Business Identifier (UBI) <b>602-868-344</b>

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

**NORTH SOUND AUTO GROUP, LLC IS AN AUTOMOBILE DEALER. WE PURCHASE, SELL AND SERVICE NEW AND USED VEHICLES IN ADDITION TO SELLING AUTOMOTIVE PARTS.**

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

**WE WOULD ONLY INITIATE CONTACT WITH ANY CURRENT/PREVIOUS OWNER(S) IF THERE WAS A POTENTIAL TITLING ISSUE OR DISCREPANCY IN LEGAL AND/OR REGISTERED INFORMATION PROVIDED TO US VERSUS WHAT IS ON RECORD WITH DOL. CONTACT ALSO BE INITIATED IF THE VEHICLE HAPPENED TO BE ABANDONED ON DEALERSHIP PROPERTY. CONTACT MAY BE MADE VIA PHONE, E-MAIL, OR REGULAR MAIL DEPENDING ON THE CONTACT INFORMATION WE HAVE AVAILABLE.**



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

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**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/12/2017 SNOHOMISH

Date and place (county) signed

NORTH SOUND AUTO GROUP, LLC

PRINT or TYPE Name

X

Signature of business or organization representative

Shantel M. Harris

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster** (Data brokers/resellers applying for CPS must complete and return this section)

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF  
WASHINGTON

## BUSINESS LICENSE

Limited Liability Company

NORTHSOUND AUTO GROUP, LLC  
DWAYNE LANE'S CHRYSLER JEEP DODGE  
10515 EVERGREEN WAY  
EVERETT, WA 98204-3867

UNEMPLOYMENT INSURANCE - ACTIVE  
MINOR WORK PERMIT - ACTIVE  
MOTOR VEHICLE DEALER #1282 - ACTIVE

Unified Business ID #: 602868344

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

### DUTIES OF MINORS:

WASH CARS, FILING, PHONES, LOT ATTENDANT

### LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

### REGISTERED TRADE NAMES:

DWAYNE LANE'S CHRYSLER JEEP DODGE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



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Print and scan or upgrade to

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If you currently have a CPS number, enter it here 13a (1VIPS)

Company/Agency name <b>Specialized Investigations, Inc. DBA - SI Investigations,</b>		Website <b>www.specialpi.com</b>	
Contact name, Primary applicant and contract manager <b>Richard Haver, Vice President</b>	(Area code) Telephone number <b>800-714-3728 x177</b>	Email (required) <b>richardh@specialpi.com</b>	
Contact name 2 (if applicable) <b>Peter Schiffrin, President</b>	(Area code) Telephone number <b>800-714-3728 x113</b>	Email (required) <b>pschiffrin@sgdinc.com</b>	
Physical address of business (number and street) <b>100 West Harrison Street, Suite N-350</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98119</b>
Mailing address of business (if different) <b>9171 Gazette Avenue</b>			
City <b>Chatsworth</b>		State <b>CA</b>	ZIP code <b>91311</b>
Provide one of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

Our company established in 1981 as a full service investigative agency. The various types of services including asset and financial investigations, surveillance, and activity checks, insurance fraud claim investigations, labor and employment, health care fraud, and various types of general investigative services.

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will only contact the owner on occasion to interview them regarding an insurance claim (e.g. auto accident, stolen vehicle, or other auto-related claims). We will not contact them for commercial purposes; we may provide the information to an insurance company who insures the owner with auto coverage.



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/24/18 (Los Angeles County)

Date and place (county) signed

Richard Hareer

PRINT or TYPE Name

X Richard Hareer

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725.  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

**Vehicle/Vessel On-line Access  
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**

**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name <b>Ballard Parking LLC</b>		Website <b>ballardparking.com</b>	
Contact name. Primary applicant and contract manager <b>Gloria Villanueva</b>	(Area code) Telephone number <b>(206) 789-5010</b>	Email (required) <b>gloriav@olympicathleticclub.com</b>	
Contact name 2 (if applicable) <b>Rachel Edland</b>	(Area code) Telephone number <b>(206) 789-5010</b>	Email (required) <b>rachele@olympicathleticclub.com</b>	
Physical address of business (number and street) <b>5301 Leary Ave NW</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98107</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>603061741</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a parking company who manages lots, issues tickets, collects fees. We use the CPS to find the registered owners of vehicles with unpaid parking tickets.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We contact the registered owners by mail by sending a notice of outstanding parking tickets.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

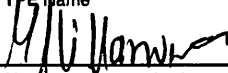
Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<div style="text-align: center;"><u>1/3/18</u> Date and place (county) signed</div> <div style="text-align: center;"><u>KING COUNTY</u></div>	<div style="text-align: center;"><u>GEORGIA VILLANUEVA</u> PRINT or TYPE Name</div> <div style="text-align: center;"><u>X</u>  Signature of business or organization representative</div>
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Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



## Vehicle/Vessel On-line Access Contract Application-IVIPS

Use this form to apply for access to the Internet Vehicle/Vessel Information Processing System (IVIPS). Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

ivips@dol.wa.gov  
Print and scan or upgrade to  
Adobe Reader XI or above)

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Phone**

(360) 359-4001

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information or contact owners as permitted by law. There is no guarantee your request will be approved. See authorities at the bottom of page 2 of this application.

If you currently have an IVIPS number, enter it here \_\_\_\_\_

Company/Agency name <b>First-Citizens Bank &amp; Trust Company</b>		Website <b>None</b>	
Contact name, Primary applicant and contract manager <b>Karen Ashe</b>	(Area code) Telephone number <b>(919) 716-7564</b>	Email (required) <b>Karen.Ashe@firstcitizens.com</b>	
Contact name 2 (if applicable) <b>Maria Lucas</b>	(Area code) Telephone number <b>(919) 716-4299</b>	Email (required) <b>Maria.Lucas@firstcitizens.com</b>	
Physical address of business (number and street) <b>100 East Tryon Road</b>			
City <b>Raleigh</b>		State <b>NC</b>	ZIP code <b>27603</b>
Mailing address of business (if different) <b>PO BOX 26592</b>			
City <b>Raleigh</b>		State <b>NC</b>	ZIP code <b>27611</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  We are a financial institution making consumer & commercial loans securing vehicles/vessels. We utilize your system using vin research to confirm/verify lienholder information.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  We will not disclose or contact the owner unless the account we are securing the vehicle/vessel on goes into default and requires further actions be taken by our Collections Department to render a resolution to the loan being secured.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners — RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the state seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. A sample notification letter is at the DOL website: <https://fortress.wa.gov/dol/ivipsprod/ContractForms.aspx>.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties — RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

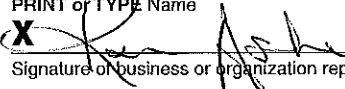
**IVIPS record fees:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

10/16/17 Wake County, NC  
Date and place (county) signed

Karen Ashe  
PRINT or TYPE Name  
  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name Gladstone Hyundai		Website	
Contact name. Primary applicant and contract manager Cindy Locke	(Area code) Telephone number 503-258-5711	Email (required) cindy.locke@tonkin.com	
Contact name 2 (if applicable) Theresa Burdick	(Area code) Telephone number 503-261-5124	Email (required) tburdick@tonkin.com	
Physical address of business (number and street) 19300 SE McLoughlin			
City Gladstone		State OR	ZIP code 97027
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Theresa Burdick

PRINT or TYPE Name

X

Signature of business or organization representative

12/14/17 Clackamas County Oregon

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





CITY OF GLADSTONE  
BUSINESS LICENSE  
525 PORTLAND AVE  
GLADSTONE, OR 97027  
(503) 557-2769

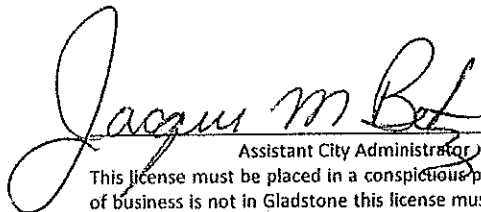
License Type: BusLicRes

License Number: BLRS0376  
Date Issued: 5/1/2017  
Expiration Date: 12/31/2017

Applicant represents that not more than 35.00 persons will regularly assist in conducting the business of AUTOMOTIVE DEALERSHIP in the City of Gladstone, Oregon.

Customer Issued To (name):  
GEE AUTOMOTIVE VI, LLC/RON TONKIN KIA

Business Address:  
19335 MCLOUGHLIN BLVD  
GLADSTONE, OR 97027

  
Assistant City Administrator

This license must be placed in a conspicuous place. If licensee's place of business is not in Gladstone this license must be carried on person of licensee or its employee.



CITY OF GLADSTONE  
BUSINESS LICENSE  
525 PORTLAND AVE  
GLADSTONE, OR 97027  
(503) 557-2769

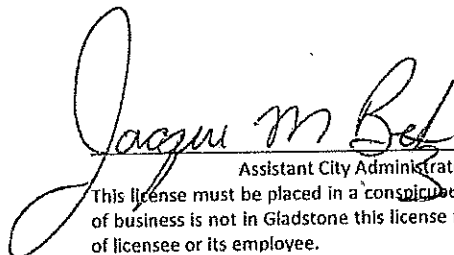
License Type: BusLicRes

License Number: BLRS0377  
Date Issued: 5/1/2017  
Expiration Date: 12/31/2017

Applicant represents that not more than 30.00 persons will regularly assist in conducting the business of AUTOMOTIVE DEALERSHIP in the City of Gladstone, Oregon.

Customer Issued To (name):  
GEE AUTOMOTIVE XIII, LLC/TONKIN GLADSTONE HYUNDAI

Business Address:  
19300 MCLOUGHLIN BLVD  
GLADSTONE, OR 97027

  
Assistant City Administrator

This license must be placed in a conspicuous place. If licensee's place of business is not in Gladstone this license must be carried on person of licensee or its employee.

## Vehicle/Vessel On-line Access Contract Application-CPS

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**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Ron Tonkin Gresham Honda</b>		Website	
Contact name. Primary applicant and contract manager <b>Tami Ancheta</b>	(Area code) Telephone number <b>503-676-7014</b>	Email (required) <b>tancheta@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>24999 SE Stark Street</b>			
City <b>Troutdale</b>		State <b>OR</b>	ZIP code <b>97060</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Theresa Burdick

PRINT or TYPE Name

X

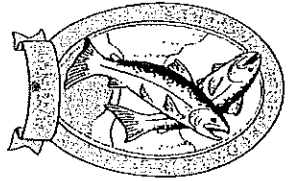
Signature of business or organization representative

12/14/17 Clackamas County Oregon

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



# CITY OF TROUTDALE

219 E. Hist. Columbia River Hwy. - Troutdale, OR 97060-2078 - 503-665-5175

## BUSINESS LICENSE

2  
0  
1  
7

LICENSE NO. 2017-1342

DATE ISSUED: 12/30/2016

DBA:

*B & E Import Co*

Tonkin Gresham Honda

24999 SE Stark

Troutdale OR 97060

having complied with Chapter 5.04 of the Troutdale Municipal Code by filing in the Office of the City Recorder.

May not be valid without a Certificate of Occupancy (see reverse side of this form).

IS HEREBY AUTHORIZED AND LICENSED TO OPERATE THE ABOVE NAMED BUSINESS FOR:

*Retail Automotive*

License is valid through: December 31, 2017

*Paul Stark*  
City Recorder, City of Troutdale, Oregon



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Gresham Hyundai</b>		Website	
Contact name. Primary applicant and contract manager <b>Nichole Watkins</b>	(Area code) Telephone number <b>503-257-2114</b>	Email (required) <b>nwatkins@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>675 E. Burnside</b>			
City <b>Gresham</b>		State <b>OR</b>	ZIP code <b>97030</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.</p>			

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When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

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  - Your current business license or
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- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Theresa Burdick

PRINT or TYPE Name

X

Signature of business or organization representative

12/14/17 Clackamas County Oregon

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

## CITY OF GRESHAM LICENSE

*This license evidences payment of the fee required by the Gresham Code 9.05.020 and  
Shall not be construed as authorizing conduct in violation of any law.*

**POST IN A CONSPICUOUS PLACE**

**Business Address:** 675 NE BURNSIDE RD  
**Owner/Officer:** RON TONKIN CHEVROLET CO

GRESH

**License No.:** 18-00000186

**Expiration Date:** March 01, 2018

**License Type:** BUSINESS

RON TONKIN HYUNDAI  
DBA: RTL-M INC  
PO BOX 76  
GRESHAM OR 97030-0012

147.00

### SUMMARY OF CHARGES & PAYMENTS:

**License #:** 18-00000186  
**Expiration Date:** March 01, 2018  
**Control #:** 0024473  
RON TONKIN HYUNDAI

#### Summary of Charges and Payments

Past Due Amount	0.00
License Charges	75.00
Additional Charges	72.00
Penalty Charges	0.00
Interest Charges	0.00
Amount Paid	147.00
Amount Due	0.00

PER EMPLOYEE FEE >2

3.00000 X 24.00 = 72.00

PLEASE RETAIN THIS PORTION FOR YOUR RECORDS.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

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**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here

13a

Company/Agency name <b>Holmes Weddle &amp; Barcott, PC</b>		Website <b>www. hwb-law.com</b>	
Contact name. Primary applicant and contract manager <b>Linda Bauer</b>	(Area code) Telephone number <b>(206) 292-8008</b>	Email (required) <b>lbauer@hwb-law.com</b>	
Contact name 2 (if applicable) <b>Joseph Martin</b>	(Area code) Telephone number <b>(206) 292-8008</b>	Email (required) <b>jmartin@hwb-law.com</b>	
Physical address of business (number and street) <b>999 Third Avenue, Suite 2600</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98104</b>
Mailing address of business (if different) <b>Same as above</b>			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>600517143</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Identification of the registered and/or legal owner of a vehicle/vessel for purposes of statutory compliance, moorage, judgment collections and other legal purposes. USER or USER employees shall not provide screen prints of the IVIPS records to any clients, customers for any reason, even if the information is the clients, customer's personal information. Clients and customers must apply for information through a public disclosure request to obtain their records from DOL. Providing a screen print may result in termination of this Agreement.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>Please see above statement.</p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1/18/18, King County  
Date and place (county) signed

Linda Bauer  
PRINT or TYPE Name  
**X**   
Signature of business or organization representative

Authorities:  
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

N/A

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



## Vehicle/Vessel On-line Access Contract Application-CPS

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cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Amica Mutual Insurance</b>		Website <b>www.amica.com</b>	
Contact name. Primary applicant and contract manager <b>Janet Kelley</b>	(Area code) Telephone number <b>800-882-6422 x 59315</b>	Email (required) <b>jkelley@amica.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>5005 Meadows Rd Suite 350</b>			
City <b>Lake Oswego</b>		State <b>Or</b>	ZIP code <b>97035</b>
Mailing address of business (if different) <b>PO Box 9690</b>			
City <b>Providence</b>		State <b>RI</b>	ZIP code <b>02940</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Insurance automobile and homeowner claims. IVIPS is used to locate involved parties that we don't have enough information on.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We do not release any information obtained by using IVIPS to any non-employee of Amica. It is used strictly within the claims department for the purpose of servicing those claims. In the event we do not have enough information from our insured to locate/contact a claimant, we will use the IVIPS to find more information. The contact will be for the purposes of claims handling only.</p>			

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  - Your current business license or
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*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

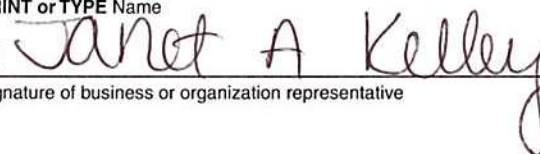
December 11, 2017 Multnomah County, OR  
Date and place (county) signed

Janet A Kelley

PRINT or TYPE Name

X

Signature of business or organization representative



**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
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Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name Amica Mutual Insurance	Contact name Lanesheia Hatter	Email lhatter@amica.com	(Area code) Phone number 800-882-6422 x 59312
	Address, City, State, Zip code 5005 Meadows Rd Suite 350 Lake Oswego Or 97035		Subscriber's permissible use Employee	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name Amica Mutual Insurance	Contact name Matthew Merry	Email mmerry@amica.com	(Area code) Phone number 877-362-6422 x 67421
	Address, City, State, Zip code 13810 SE Eastgate Way Suite 160 Bellevue Wa 98005		Subscriber's permissible use Employee	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>ROLAND BROWN LEGAL SERVICES</b>		Website <b>RBLEGALSERVICES.COM</b>	
Contact name. Primary applicant and contract manager. <b>ROLAND BROWN</b>	(Area code) Telephone number <b>425-367-9444</b>	Email (required) <b>ROLANDBROWN@RBLEGALSERVICES.COM</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>6820 TATEM BEACH LOOP RD.</b>			
City <b>TULALIP</b>		State <b>WA</b>	ZIP code <b>98271</b>
Mailing address of business (if different) <b>PO BOX 8000</b>			
City <b>MARYSVILLE</b>		State <b>WA</b>	ZIP code <b>98270</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 20px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <div style="text-align: center; margin-top: 10px;"><b>PROCESS SERVER. INFO NEEDED TO LOCATE EVASIVE LITIGANTS</b></div>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <div style="text-align: center; margin-top: 10px;"><b>NO</b></div>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/21/17 - SNOHOMISH COUNTY  
Date and place (county) signed

ROLAND BROWN  
PRINT or TYPE Name  
**X** [Signature]  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

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**Vehicle/Vessel Online Access  
Contract Application-CPS**

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**Email (quickest)**

cps@dol.wa.gov

Print and scan or upgrade to  
Adobe Reader XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

**Fax**  
(360) 570-7895

Department of Licensing

PO Box 2957

Olympia, WA 98507

Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)

We are committed to protecting personal information. Records and personal information are released in compliance with the Federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a**

Company/Agency name: <i>Jess Ford of Grand Coulee</i>		Website	
Contact name, Primary applicant and contract manager <i>Frederick Jess</i>	(Area code) Telephone number <i>509-633-0110</i>	Email (required) <i>garethjessford.com</i>	
Contact name 2 (if applicable) <i>Valerie Jess</i>	(Area code) Telephone number <i>509-633-0110</i>	Email (required) <i>valerie@jessford.com</i>	
Physical address of business (number and street) <i>533 Midway Ave</i>			
City <i>Grand Coulee</i>	State <i>WA</i>	ZIP code <i>99133</i>	
Mailing address of business (if different) <i>PO Box 48</i>			
City <i>Grand Coulee</i>	State <i>WA</i>	ZIP code <i>99133</i>	
Provide one of these identifiers	Taxpayer Identification Number (TIN) <b>98</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)

Answer the following  
Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

*Motor Vehicle Dealer*

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

*We will not share this information with anyone.  
This is for us to see who owns the vehicle when  
trading in.*

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES.** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

1-10-18: Grant County

Date and place (county) signed

PRINT OR TYPE Name

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF  
WASHINGTON

# RESELLER PERMIT

Washington State Department of Revenue

PO Box 47476 • Olympia, WA 98504-7476 • 1-800-642-7706

602 446 741  
JESS FORD OF GRAND COULEE LLC  
PO BOX 48  
GRAND COULEE, WA 99133-0048

Permit Number: A10 4360 21

Effective Date: 01-01-2018  
Expiration Date: 12-31-2021

## Business Activities: NEW CAR DEALERS

### This permit can be used to purchase:

- Merchandise and inventory for resale without intervening use
- Ingredients, components, or chemicals used in processing new articles of tangible personal property produced for sale
- Feed, seed, seedlings, fertilizer, and spray materials by a farmer
- Materials and contract labor for retail/wholesale construction
- Items for dual purposes (see Purchases for Dual Purposes on back)

### This permit cannot be used to purchase:

- Items for personal or household use
- Promotional items or gifts
- Items used in your business that are not resold, such as office supplies, equipment, tools, and equipment rentals
- Materials and contract labor for public road construction or U.S. government contracting (see Definitions on back)
- Materials and contract labor for speculative building

**This permit is no longer valid if the business is closed.**

### The business named on this permit acknowledges:

- It is solely responsible for all purchases made under this permit
- Misuse of the permit:
  - Subjects the business to a penalty of 50 percent of the tax due, in addition to the tax, interest, and penalties imposed (RCW 82.32.291)
  - May result in this permit being revoked

Notes (optional):

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**Important:** The Department of Revenue may use information from sellers to verify all purchases made with this permit were qualified.



# BUSINESS LICENSE

STATE OF  
WASHINGTON

## Limited Liability Company

JESS FORD OF GRAND COULEE, LLC  
JESS FORD OF GRAND COULEE  
522 MIDWAY AVE  
GRAND COULEE, WA 99133

UNEMPLOYMENT INSURANCE - ACTIVE  
TAX REGISTRATION - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE  
MOTOR VEHICLE DEALER #0210 - ACTIVE

Unified Business ID #: 602446741

Business ID #: 001

Location: 0001

Expires: Nov 30, 2018

## LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

## REGISTERED TRADE NAMES:

JESS FORD OF GRAND COULEE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county and city regulations.

Director, Department of Revenue

UBI: 602446741 001 0001

STATE OF WASHINGTON

Expires: Nov 30, 2018

JESS FORD OF GRAND COULEE,  
LLC

JESS FORD OF GRAND COULEE  
522 MIDWAY AVE  
GRAND COULEE, WA 99133

UNEMPLOYMENT INSURANCE -  
ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

TAX REGISTRATION - ACTIVE

MOTOR VEHICLE DEALER #0210 -  
ACTIVE





STATE OF  
WASHINGTON

# RESELLER PERMIT

Washington State Department of Revenue

PO Box 47476 • Olympia, WA 98504-7476 • 1-800-647-7706

**Issued to:**  
602 446 741  
JESS FORD OF GRAND COULEE LLC  
PO BOX 48  
GRAND COULEE WA 99133 0048

**Business Activities:**  
NEW CAR DEALERS

**Permit Number:** A10 4360 17  
**Effective Date:** 01-01-2014  
**Expiration Date:** 12-31-2017

**This permit can be used to purchase:**

- Merchandise and inventory for resale without intervening use
- Ingredients, components, or chemicals used in processing new articles of tangible personal property produced for sale
- Feed, seed, seedlings, fertilizer, and spray materials by a farmer
- Materials and contract labor for retail/wholesale construction
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**This permit cannot be used to purchase:**

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  - May result in this permit being revoked

**Notes (optional):** \_\_\_\_\_

**Important:** The Department of Revenue may use information from sellers to verify all purchases made with this permit were qualified.

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**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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 If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Royal Moore Subaru</b>		Website <b>royalmoore.com</b>	
Contact name, Primary applicant and contract manager <b>Maureen Springer</b>	(Area code) Telephone number <b>503-640-5660</b>	Email (required) <b>mspringer@royalmoore.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1326 S.E. Enterprise Circle</b>			
City <b>Hillsboro</b>		State <b>Oregon</b>	ZIP code <b>97123</b>
Mailing address of business (if different) <b>P.O. Box 646</b>			
City <b>Hillsboro</b>		State <b>Oregon</b>	ZIP code <b>97123</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <div style="background-color: black; color: white; text-align: center; padding: 2px;">6d</div>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <b>New and Used Vehicle Sales</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  <b>We will not disclose or contact the owner.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Maureen Springer, Comptroller

PRINT or TYPE Name

**X** *Maureen Springer*

Signature of business or organization representative

\_\_\_\_\_  
Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

# VEHICLE DEALER CERTIFICATE

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**DA2681**

**EFFECTIVE: MARCH 1, 2018**

**EXPIRES: FEBRUARY 28, 2021**

**Issued To:**

**ROYAL MOORE BUICK GMC INC  
DBA: ROYAL MOORE SUBARU  
1326 SE ENTERPRISE CIR  
HILLSBORO OR 97123**

*This business is authorized to engage in buying, selling, or dealing in new or used vehicles in the state of Oregon under the provisions of ORS 822.020, and to exercise privileges granted by certificate under the provisions of ORS 822.040.*

*To be valid, this certificate must be prominently posted at the business address listed above and is not valid at any other location. It is not valid if expired, revoked, canceled or suspended, under the provisions of ORS 822.045 and ORS 822.050.*

*Driver and Motor Vehicle Services  
Department of Transportation  
Salem OR 97314*

**\* ALTERATION, MUTILATION OR ERASURE WILL VOID CERTIFICATE \***



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Ron Tonkin Acura</b>		Website	
Contact name, Primary applicant and contract manager <b>Meghan Gauntt</b>	(Area code) Telephone number <b>503-203-2715</b>	Email (required) <b>mgauntt@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>9655 SW Canyon Road</b>			
City <b>Portland</b>		State <b>OR</b>	ZIP code <b>97225</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Theresa Burdick

PRINT or TYPE Name

12/14/17 Clackamas County Oregon

Date and place (county) signed

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**CITY OF PORTLAND**  
OFFICE OF MANAGEMENT AND FINANCE  
BUREAU OF REVENUE AND FINANCIAL SERVICES

Ted Wheeler, Mayor  
Ken Rust, Chief Financial Officer  
Thomas W. Lannom, Revenue Division Director

Terri Williams, Manager  
Tax Division  
Revenue Division  
111 SW Columbia Street, Suite 600  
Portland, Oregon 97201-5840  
(503) 823-5157  
FAX (503) 823-5192  
TDD (503) 823-6868

May 19, 2017



GEE AUTOMOTIVE PORTLAND X LLC  
DBA RON TONKIN ACURA  
4560 SE INTERNATIONAL WAY STE 209  
MILWAUKIE OR 97222-4628

Account Number

6a

RE: Certificate of Compliance

Questions? Call (503) 865-2478

 MULTNOMAH COUNTY	<b>CERTIFICATE OF COMPLIANCE</b> REVENUE DIVISION - TAX DIVISION, 111 SW COLUMBIA ST., SUITE 600, PORTLAND, OR 97201-5840 PHONE: (503) 823-5157, FAX: (503) 823-5192, TDD: (503) 823-6868	
ACCOUNT: 6a	DATE ISSUED: May 19, 2017	
TAXFILER:	GEE AUTOMOTIVE PORTLAND X LLC DBA RON TONKIN ACURA 4560 SE INTERNATIONAL WAY STE 209 MILWAUKIE OR 97222-4628	
LOCATION:	9655 SW CANYON RD PORTLAND OR 97225	
Is in compliance with the City of Portland Business License Tax Law and Multnomah County Business Income Tax Law as of May 19, 2017.		
<small>A Certificate of Compliance indicates that on the date of issuance the business was in compliance with applicable tax laws. It does not exempt the holder from annual filing requirements, nor does it entitle the holder to engage in any business activity not otherwise allowed by federal, state, and/or local laws.</small>		
REV BUR 12/09		

*An Equal Opportunity Employer*  
To help ensure equal access to programs, services and activities,  
the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary  
aids/services to persons with disabilities upon request.  
[www.portlandoregon.gov/revenue](http://www.portlandoregon.gov/revenue)

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**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Ron Tonkin Kia</b>		Website	
Contact name. Primary applicant and contract manager <b>Amy Ivanov</b>	(Area code) Telephone number <b>503-258-6394</b>	Email (required) <b>amy.ivanov@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>19335 SE McLoughlin Blvd</b>			
City <b>Gladstone</b>		State <b>OR</b>	ZIP code <b>97027</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.</p>			



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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/14/17 Clackamas County Oregon

Date and place (county) signed

Theresa Burdick

PRINT or TYPE Name

**X**

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



CITY OF GLADSTONE  
BUSINESS LICENSE  
525 PORTLAND AVE  
GLADSTONE, OR 97027  
(503) 557-2769

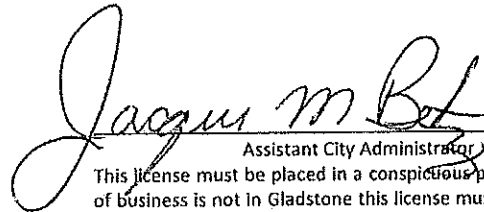
License Type: BusLicRes

License Number: BLRS0376  
Date Issued: 5/1/2017  
Expiration Date: 12/31/2017

Applicant represents that not more than 35.00 persons will regularly assist in conducting the business of AUTOMOTIVE DEALERSHIP in the City of Gladstone, Oregon.

Customer Issued To (name):  
GEE AUTOMOTIVE VI, LLC/RON TONKIN KIA

Business Address:  
19335 MCLOUGHLIN BLVD  
GLADSTONE, OR 97027

  
Assistant City Administrator

This license must be placed in a conspicuous place. If licensee's place of business is not in Gladstone this license must be carried on person of licensee or its employee.



CITY OF GLADSTONE  
BUSINESS LICENSE  
525 PORTLAND AVE  
GLADSTONE, OR 97027  
(503) 557-2769

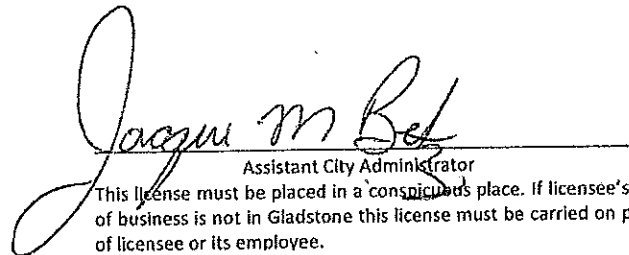
License Type: BusLicRes

License Number: BLRS0377  
Date Issued: 5/1/2017  
Expiration Date: 12/31/2017

Applicant represents that not more than 30.00 persons will regularly assist in conducting the business of AUTOMOTIVE DEALERSHIP in the City of Gladstone, Oregon.

Customer Issued To (name):  
GEE AUTOMOTIVE XIII, LLC/TONKIN GLADSTONE HYUNDAI

Business Address:  
19300 MCLOUGHLIN BLVD  
GLADSTONE, OR 97027

  
Assistant City Administrator

This license must be placed in a conspicuous place. If licensee's place of business is not in Gladstone this license must be carried on person of licensee or its employee.

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Ron Tonkin Mazda</b>		Website	
Contact name, Primary applicant and contract manager <b>Breanna Schuttler</b>	(Area code) Telephone number <b>503-408-4515</b>	Email (required) <b>breanna.schuttler@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>750 SE 122nd Ave</b>			
City <b>Portland</b>		State <b>OR</b>	ZIP code <b>97225</b>
Mailing address of business (if different)			
City		State	ZIP code
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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/14/17 Clackamas County Oregon

Date and place (county) signed

Theresa Burdick

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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**CITY OF PORTLAND**  
OFFICE OF MANAGEMENT AND FINANCE  
BUREAU OF REVENUE AND FINANCIAL SERVICES

Ted Wheeler, Mayor  
Ken Rust, Chief Financial Officer  
Thomas W. Lannon, Revenue Division Director

Terri Williams, Manager  
Tax Division  
Revenue Division  
111 SW Columbia Street, Suite 600  
Portland, Oregon 97201-5840  
(503) 823-5157  
FAX (503) 823-5192  
TDD (503) 823-6868

May 19, 2017

GEE AUTOMOTIVE PORTLAND II LLC  
DBA RON TONKIN MAZDA  
4560 SE INTERNATIONAL WAY STE 209  
MILWAUKIE OR 97222-4628

Account Number

6a

RE: Certificate of Compliance

Questions? Call (503) 865-2858



**CERTIFICATE OF COMPLIANCE**

REVENUE DIVISION - TAX DIVISION, 111 SW COLUMBIA ST., SUITE 600, PORTLAND, OR 97201-5840  
PHONE: (503) 823-5157, FAX: (503) 823-5192, TDD: (503) 823-6868



DATE ISSUED: May 19, 2017

ACCOUNT: 6a

Verify compliance at [www.portlandoregon.gov/biztax](http://www.portlandoregon.gov/biztax)

TAXFILER: GEE AUTOMOTIVE PORTLAND II LLC  
DBA RON TONKIN MAZDA  
4560 SE INTERNATIONAL WAY STE 209  
MILWAUKIE OR 97222-4628

LOCATION: 750 SE 122ND AVE  
PORTLAND OR 97233

Is in compliance with the City of Portland Business License Tax Law and  
Multnomah County Business Income Tax Law as of May 19, 2017.

*A Certificate of Compliance indicates that on the date of issuance the business was in compliance with applicable tax laws. It does not exempt the holder from annual filing requirements, nor does it entitle the holder to engage in any business activity not otherwise allowed by federal, state, and/or local laws.*

REVBUR 12/09

*An Equal Opportunity Employer  
To help ensure equal access to programs, services and activities,  
the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary  
aids/services to persons with disabilities upon request.  
[www.portlandoregon.gov/revenue](http://www.portlandoregon.gov/revenue)*

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Ron Tonkin Toyota</b>		Website	
Contact name. Primary applicant and contract manager <b>Michelle Ennis</b>	(Area code) Telephone number <b>503-408-4513</b>	Email (required) <b>michelle.ennis@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>750 SE 122nd Ave</b>			
City <b>Portland</b>		State <b>OR</b>	ZIP code <b>97225</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/14/17 Clackamas County Oregon

Date and place (county) signed

Theresa Burdick

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**CITY OF PORTLAND**  
OFFICE OF MANAGEMENT AND FINANCE  
BUREAU OF REVENUE AND FINANCIAL SERVICES

Ted Wheeler, Mayor  
Ken Rust, Chief Financial Officer  
Thomas W. Lannom, Revenue Division Director

Terri Williams, Manager  
Tax Division  
Revenue Division  
111 SW Columbia Street, Suite 600  
Portland, Oregon 97201-5840  
(503) 823-5157  
FAX (503) 823-5192  
TDD (503) 823-6868

May 19, 2017

GEE AUTOMOTIVE PORTLAND I LLC  
DBA RON TONKIN TOYOTA  
4560 SE INTERNATIONAL WAY STE 209  
MILWAUKIE OR 97222-4628

Account Number

6a

RE: Certificate of Compliance

Questions? Call (503) 865-2858



MULTNOMAH  
COUNTY

**CERTIFICATE OF COMPLIANCE**

REVENUE DIVISION - TAX DIVISION, 111 SW COLUMBIA ST., SUITE 600, PORTLAND, OR 97201-6840  
PHONE: (503) 823-5157, FAX: (503) 823-5192, TDD: (503) 823-6868



DATE ISSUED: May 19, 2017

ACCOUNT:

6a

Verify compliance at [www.portlandoregon.gov/biztax](http://www.portlandoregon.gov/biztax)

TAXFILER: GEE AUTOMOTIVE PORTLAND I LLC  
DBA RON TONKIN TOYOTA  
4560 SE INTERNATIONAL WAY STE 209  
MILWAUKIE OR 97222-4628

LOCATION: 750 SE 122ND AVE  
PORTLAND OR 97233

Is in compliance with the City of Portland Business License Tax Law and  
Multnomah County Business Income Tax Law as of May 19, 2017.

*A Certificate of Compliance indicates that on the date of issuance the business was in compliance with applicable tax laws. It does not exempt the holder from annual filing requirements, nor does it entitle the holder to engage in any business activity not otherwise allowed by federal, state, and/or local laws.*

REVBUR 12/09

*An Equal Opportunity Employer  
To help ensure equal access to programs, services and activities,  
the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary  
aids/services to persons with disabilities upon request.  
[www.portlandoregon.gov/revenue](http://www.portlandoregon.gov/revenue)*



## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>Sitka Investigative Services, Inc.</b>		Website <b>www.sitkainvestigations.com</b>	
Contact name. Primary applicant and contract manager <b>Christian Martin</b>	(Area code) Telephone number <b>(206) 937-1113</b>	Email (required) <b>cmartin@sitkainvestigations.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>5358 33rd Ave. NW Suite 104</b>			
City <b>Gig Harbor</b>		State <b>WA</b>	ZIP code <b>98335</b>
Mailing address of business (if different) <b>6523 California Avenue SW Suite B</b>			
City <b>Seattle, WA</b>		State <b>WA</b>	ZIP code <b>98136</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601898830</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Investigation, Protection &amp; Service of Process. Will use searches to identify and locate suspects who are believed to pose a danger to clients, for the purpose of conducting threat assessments and maintaining surveillance; as well as locate subjects for legal service of process.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>I will not contact the owner, except in the cases in which I am attempting to serve legal documents. Nor will I disclose the information to other parties outside of those involved with providing protection or conducting legal surveillance.</p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
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  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Christian Martin

PRINT or TYPE Name

X

Signature of business or organization representative

15 NOVEMBER 2017 King County

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in  
and save it.**Mail**Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Washington Legal Messengers, Inc.</b>		Website <b>www.WashingtonLegalMessengers.com</b>	
Contact name. Primary applicant and contract manager <b>Tom Bice, General Manager</b>	(Area code) Telephone number <b>(206) 374-0100</b>	Email (required) <b>WLM@WashingtonLegalMessengers.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>2225 Fourth Avenue, Suite B</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98121</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>601514797-001-0002</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>We are a legal messenger company and serve legal documents on defendants for service of process. We use and search vehicle records to help facilitate service of process on defendants. This information is used to verify if the address we have is current for a defendant or to confirm the identity of a defendant served.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>No, we do not contact the owner of the vehicle nor do we disclose that info to an attorney or a private investigator. We would only provide this information to our process server who is serving legal documents on that defendant.</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Tom Bice

PRINT or TYPE Name

X

Signature of business or organization representative

February 1st, 2018, King County, WA

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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**Vehicle/Vessel On-line Access  
Contract Application-CPS**

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Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>SUNSET CHEVROLET INC</b>		Website	
Contact name, Primary applicant and contact manager <b>JOAN GORDON</b>	(Area code) Telephone number <b>253-863-8144</b>	Email (required) <b>GORDONSS2001@YAHOO.COM</b>	
Contact name 2 (if applicable) <b>CRISTI ACUNA</b>	(Area code) Telephone number <b>253-863-8144</b>	Email (required) <b>CRISTIACUNA@SUNSETCHEV.C</b>	
Physical address of business (number and street) <b>910 TRAFFIC AVE</b>		State <b>WA</b>	ZIP code <b>98390</b>
Mailing address of business (if different)			
City	State	ZIP code	
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>88</b>	Employee Identification Number (EIN) <b>88</b>	WA Unified Business Identifier (UBI) <b>88</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>NEW AND USED CAR DEALERSHIP TO CHECK REGISTERED AND LEGAL OWNERSHIP OF PURCHASED VEHICLES AND TRADE IN VEHICLES</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>WE WILL NOT DISCLOSE THE INFORMATION</b></p>			



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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

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12/11/17 SUMNER PIERCE CO

Date and place (county) signed

PRINT or TYPE Name

Joan Goran

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





4885-1

SUNSET CHEVROLET, INC.  
910 TRAFFIC AVE  
SUMNER WA 98390-1142

DETACH BEFORE POSTING



STATE OF  
WASHINGTON

Corporation

SUNSET CHEVROLET, INC.  
910 TRAFFIC AVE  
SUMNER, WA 98390-1142

TAX REGISTRATION - ACTIVE

## BUSINESS LICENSE

Unified Business ID #: 277002067

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

MOTOR VEHICLE DEALER #0524 - ACTIVE

### CITY ENDORSEMENTS:

SUMNER GENERAL BUSINESS #BUS2002-294 - ACTIVE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>South Kitsap High School</b>		Website	
Contact name. Primary applicant and contract manager <b>Diane Fox</b>	(Area code) Telephone number <b>360-874-5601</b>	Email (required) <b>Foxd@SKSchools.org</b>	
Contact name 2 (if applicable) <b>Charla Cole</b>	(Area code) Telephone number <b>360-874-5606</b>	Email (required) <b>Colec@SKSchools.org</b>	
Physical address of business (number and street) <b>425 Mitchell Ave.</b>			
City <b>Port Orchard</b>		State <b>WA</b>	ZIP code <b>98366</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <b>91-6001633</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>We are a high school and our campus security will use it to help with vehicle parking/trespassing violators. Along with parking congestion, blocking lanes, fire lane and no parking violators.</b></p> <p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>Yes, we will attempt to locate the driver of the cars need to be moved.</b></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<u>November 14, 2017 Kitap</u> Date and place (county) signed	<u>Charles R Cole</u> PRINT or TYPE Name  <u>X Charles R Cole</u> Signature of business or organization representative
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**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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**Adobe Reader** XI or above to fill it in and save it.

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Law Office Of William DeVoe</b>		Website	
Contact name. Primary applicant and contract manager <b>William DeVoe</b>	(Area code) Telephone number <b>(206) 251-1688</b>	Email (required) <b>wdevoe@lawdevoe.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>Broderick Building Suite 340, 615 2nd Ave</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98104</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>Attorney at Law and I will use the records to collect amounts owed for boat</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>In working for a marina that his owed moorage, the RCW requires that letters be sent to both the legal and registered owner. I will only be using the information related to a legal matter.</b>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

William D. DeVoe

PRINT or TYPE Name

X

Signature of business or organization representative

December 28, 2017

Date and place (county) signed

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Idaho State Bar**  
**Member - 2017**

Idaho State Bar Number: 9650

**William D. De Voe**

This is to certify that the above individual complied with the 2017 Active licensing requirements. Information on the individual's current status is available from the Idaho State Bar.  
PO Box 895, Boise, ID 83701 • (208) 334-4500 • [licensing@isb.idaho.gov](mailto:licensing@isb.idaho.gov)

**ALASKA BAR ASSOCIATION**

William D. DeVoe

Active Member 2017

Membership # 9101001

Signature

840 K Street, Suite 100  
Anchorage, AK 99501

907-272-7469  
[www.alaskabar.org](http://www.alaskabar.org)

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Print and scan or upgrade to

**Adobe Reader** XI or above to fill it in and save it.

**Mail**

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PO Box 2957  
Olympia, WA 98507

**Fax**

(360) 570-7895

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If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Seattle Credit Union dba Seattle Metropolitan Credit Union</b>		Website <b>www.smcu.com</b>	
Contact name. Primary applicant and contract manager <b>Elisabeth Hayes</b>	(Area code) Telephone number <b>206-398-5531</b>	Email (required) <b>elisabeth.hayes@seattlecu.com</b>	
Contact name 2 (if applicable) <b>Lee Pierce</b>	(Area code) Telephone number <b>206-398-5500</b>	Email (required) <b>lee.pierce@seattlecu.com</b>	
Physical address of business (number and street) <b>1521 1st Ave S, Ste 500</b>			
City <b>Seattle</b>		State <b>WA</b>	ZIP code <b>98134</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>600 576 589</b>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><b>As a Credit Union in Washington State we grant collateralized loans to our members which includes titled vehicles, boats, and RV's. We require access to vehicle and vessel records in order to review current lien holder and registered owner information for the purposes of transacting on that collateral and adding/removing registered and legal owners of the collateral.</b></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><b>We will only contact the owner in the context of them initiating a loan application/transaction with Seattle Credit Union and for the purposes of perfecting the lien as requested by the registered owner/owners. No record information will be provided to any 3rd party outside of the Credit Union.</b></p>			



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

11/30/2017 King County

Date and place (county) signed

Elisabeth Hayes

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**

N/A

**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

**From:** [Nanette Edgett-Janssen](#)  
**To:** [DOL DRIVES ASD Contracted Plate Search](#)  
**Subject:** Vehicle/Vessel Online Access Application  
**Date:** Thursday, December 28, 2017 12:46:46 PM  
**Attachments:** [20171228124725134.pdf](#)

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Attached is our application to renew our online access for vehicle/vessel lookups. Please let me know if there is anything else we need to complete.

Sincerely,

Nanette Edgett-Janssen  
Operations Supervisor  
Progressions Credit Union  
Direct: (509) 444-0473  
Toll Free: (800) 828-8691 ext 233



Confidentiality Notice: This email message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply email and destroy all copies of the original message.

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If you currently have a CPS number, enter it here 13a \_\_\_\_\_

Company/Agency name <b>UNIVERSAL PARKING SERVICES LLC</b>		Website <a href="http://www.parkuniversal.com">www.parkuniversal.com</a>	
Contact name. Primary applicant and contract manager <b>DIMITRIOS MOUSTAKAS</b>	(Area code) Telephone number <b>971-599-3793</b>	Email (required) <a href="mailto:info@parkuniversal.com">info@parkuniversal.com</a>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>1136 NW HOYT ST SUITE 200</b>			
City <b>PORTLAND</b>		State <b>OR</b>	ZIP code <b>97209</b>
Mailing address of business (if different) <b>PO BOX 4634</b>			
City <b>PORTLAND</b>		State <b>OR</b>	ZIP code <b>97208</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <span style="background-color: black; color: white; padding: 0 5px;">6d</span>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Parking management operations. Parking enforcement in compliance with Portland City Code 7.25. To verify vehicle owners.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. The vehicle owner will be contacted by first class mail for invoicing purposes, in compliance with Portland City Code 7.25.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

02-15-2018 Multnomah, Oregon

Date and place (county) signed

DIMITRIOS MOUSTAKAS

PRINT or TYPE Name

**X**

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087



**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

## Vehicle/Vessel Contract Application

Use this form to apply for access to vehicle/vessel records through the Internet Vehicle/Vessel Information Processing System (IVIPS) or to receive bulk/batch data. Send the completed form with a copy of your business license and other required documents by fax to: **(360) 570-7895** or email (print and scan or upgrade to **Adobe Reader XI** or above) to: **vsdisclose@dol.wa.gov**.

Please allow 14 business days to process and respond to your request. Questions or assistance: IVIPS: (360) 359-4001; Bulk/batch: (360) 902-0136.

We are committed to protecting personal information and there is no guarantee you will be approved. We release records only as allowed by state and federal laws, including the Driver Privacy Protection Act (DPPA). The DPPA also restricts redisclosure of personal information you receive.

### Fees

**IVIPS contract fees:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee.

**Bulk records contract fees:** There is a 1-cent fee per unique VIN record. The contractor is also responsible to pay a onetime set-up fee and monthly maintenance fee. Setup and maintenance fees may vary for bulk records.

<b>1</b> Method of access you are requesting			
<input checked="" type="checkbox"/> IVIPS ( <i>Individual record inquiries</i> ) Current IVIPS number, if applicable: <b>13a</b>			
<input type="checkbox"/> Bulk vehicle/vessel records ( <i>Batch process</i> ) Frequency ( <i>check one</i> ): <input type="checkbox"/> One time <input type="checkbox"/> Periodic <input type="checkbox"/> Regular			
PRINT or TYPE Company / Agency name Pacific Coast Attorney Services			
Contract contact/manager ( <i>IVIPS and Bulk records accounts</i> ) Chris Ulin		Signing Authority name ( <i>Bulk records accounts only</i> )	
(Area code) Phone number (206) 652-2692	Email ( <i>required for IVIPS and Bulk records</i> ) chrispcas@gmail.com	(Area code) Phone number	Email ( <i>required for Bulk records</i> )
Physical address of business ( <i>Number and street, City, State, ZIP code</i> ) 15215 52nd Ave S, Ste 202, Tukwila, WA 98188			
Mailing address of business, if different ( <i>Address or PO Box, City, State, ZIP code</i> ) 15215 52nd Ave S, Ste 202, Tukwila, WA 98188			
Provide one of these identifiers:	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI) 603351425
<b>2</b> Provide a detailed explanation of your primary business activity (exactly what your business does).			
Service of Process, Court Filing, Court Records Search, Foreclosure Sales Rep, Messenger Service, Skip Trace.			
<b>3</b> Check all that apply to you and/or your business			
<input type="checkbox"/> Attorney <input type="checkbox"/> Auction <input type="checkbox"/> Auto manufacturer or agent <input type="checkbox"/> Bail bonds <input type="checkbox"/> Bank or financing firm <input type="checkbox"/> Business <input type="checkbox"/> Commercial parking company <input type="checkbox"/> Credit union <input type="checkbox"/> Data broker/Reseller <input type="checkbox"/> Debt recovery/Collection <input type="checkbox"/> Employer/Prospective employer <input type="checkbox"/> Government <input type="checkbox"/> Guardianship/Trustee service <input type="checkbox"/> Homeowner association <input type="checkbox"/> Hospital <input type="checkbox"/> Hulk hauler <input type="checkbox"/> Insurance company/agent	<input type="checkbox"/> Lien service <input type="checkbox"/> Marina <input type="checkbox"/> Neighborhood block watch <input type="checkbox"/> Newspaper or media <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Parking enforcement <input type="checkbox"/> Private investigator <input checked="" type="checkbox"/> Process server <input type="checkbox"/> Property mgmt. - Government <input type="checkbox"/> Property mgmt. - Private <input type="checkbox"/> Repossession service <input type="checkbox"/> Retail/Store <input type="checkbox"/> School - Private <input type="checkbox"/> School - Public <input type="checkbox"/> Scrap processor or wrecker <input type="checkbox"/> Security services - Government <input type="checkbox"/> Security services - Private	<input type="checkbox"/> Service bureau for another business Provide business name: _____ <input type="checkbox"/> Storage facility <input type="checkbox"/> Title/Escrow <input type="checkbox"/> Toll facility <input type="checkbox"/> Towing company <input type="checkbox"/> Transporter <input type="checkbox"/> Union (non-profit) <input type="checkbox"/> Vehicle/Vessel dealer <input type="checkbox"/> I represent a business that will provide information to another party Provide business names: _____ <input type="checkbox"/> Other (explain) _____ _____	

**4** Explain in detail why you need vehicle/vessel information. Give examples. Attach additional pages if necessary.

In order to verify a party's address for purpose of legal service

**5** Redisclosure and/or selling of information

Will you sell or provide the information to anyone else? ..... ☐ Sell ☒ Provide ☐ No

If no, skip to Section 6.

If yes, who will you provide or sell the information?

Law firms, collection companies, and state agencies

The release and redisclosure of personal information is restricted by state and federal laws. How do you ensure recipients are entitled to personal information under these laws?

The address or information is only supplied to attorney/collection firms for which we are attempting to serve legal process

How will you provide the information to recipients? Explain.

The address may end up on the proof of service that would be filed with the courts

**6** Owner contact

Will you contact the vehicle/vessel owner? ..... ☒ Yes ☐ No

*Unsolicited business contact for commercial purposes is strictly prohibited.*

If yes, why will you contact the owner and how will you contact them?

Contact would be made in person to serve legal papers. If it is the party (defendant) in the case, we may end up serving them with legal papers.

**7** Answer the following

1. Do you agree not to sell or provide the information to any third party that has not been disclosed as part of this application? ..... ☒ Yes ☐ No

2. Do you agree not to use the information for any purpose other than reasons stated on this application? ..... ☒ Yes ☐ No

3. Do you agree not to use, or facilitate the use of, the information for the purpose of making unsolicited business contact, or promoting the sale of any goods or services? ..... ☒ Yes ☐ No

- ☐ **I represent a government agency.** Agency name: \_\_\_\_\_  
 Do you agree the information you receive will only be used in an official capacity and solely for carrying out the functions of your agency? ..... ☐ Yes ☐ No
- ☐ **I represent a Washington State business.** Attach legible copies of:
- your current business license
  - any/all professional licenses that you possess
- ☐ **I represent a business outside Washington State.** If your business is not required to be licensed in the state of Washington, attach a legible copy of either:
- your current business license
  - a letter with a signature of the owner or authorized representative indicating you are their agent. The letter must include your Employer Identification Number (EIN) or Taxpayer Identification Number (TIN).
- ☒ **I am a process server.** Attach legible copies of:
- your current business license
  - any/all professional licenses that you possess
  - registration for county jurisdictions
- ☐ **I represent a non-profit organization or corporation.**
1. Attach a legible copy of one of the following:
    - Your Articles of Incorporation, filed with the Secretary of State
    - Your Tax Exempt Status from the Internal Revenue Services (501)(c)(3)
    - Other documents reviewed and approved by the Department of Licensing Public Records Officer
  2. Submit a letter with a signature of the business owner or authorized representative indicating you are their agent.
- ☐ **I represent a data broker/reseller** – attach a legible copy of your current business license.  
 IVIPS applicants must also include:
- subscriber roster (provided on page 4)
  - subscriber agreements
- ☐ **I am an attorney.\*** Attach legible copies of:
- your current business license
  - your current bar card
- ☐ **I am a private investigator.\*** Attach legible copies of:
- your current Private Investigator license
  - your current business license

**\*Whenever an attorney or private investigator accesses a vehicle record in IVIPS, we will send a notification letter to the vehicle owner. RCW 46.12.635**

**Knowingly making a false statement or concealing a material fact required in this request or making false representation to obtain any personal information from an individual's motor vehicle record is subject to federal criminal fines under the DPPA and RCW 46.12.640**

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
 President  
 Title

1/19/2018 & King County  
 Date and place (county) signed

**X** *Chris Ulin*  
 Signature

Federal Driver Privacy Protection Act (DPPA) 18 U.S.C. §2721 through §2725  
 Washington State laws RCW 42.56, RCW 46.12, RCW 47, WAC 308-10, and WAC 308-93



**Subscriber Roster (Data brokers/resellers applying for IVIPS must complete this section)**

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use each subscriber qualifies
- Retain Subscriber Roster for 6 years and provide to DOL when requested

Your contract and/or IVIPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

**NOTE:** When a subscriber gives information to an attorney or private investigator, a notification letter must be sent. Failure to send a notification letter is a violation of your contract and Washington State laws. A sample notification letter is at

<https://fortress.wa.gov/dol/ivipsprod/>.

In the *Subscriber's permissible use* box, provide a specific description of why the subscriber needs access to personal information. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	Telephone #
	Address, City, State, ZIP code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the Internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.**  
**Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>Farmers Insurance</b>		Website	
Contact name, Primary applicant and contract manager <b>Linda Swopes</b>	(Area code) Telephone number <b>503-265-6071</b>	Email (required) <b>linda.swopes@farmersinsurance.com</b>	
Contact name 2 (if applicable) <b>Dara Glazier</b>	(Area code) Telephone number <b>503-265-6131</b>	Email (required) <b>Dara.Glazier@farmersinsurance.com</b>	
Physical address of business (number and street) <b>1112 NE 51st Circle</b>			
City <b>Vancouver</b>	State <b>WA</b>	ZIP code <b>98682</b>	
Mailing address of business (if different) <b>10200 SW Greenburg Rd. Suite 200</b>			
City <b>Portland</b>	State <b>OR</b>	ZIP code <b>97223</b>	
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <b>409012223</b>
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <b>We are a property casualty Insurance Company. We process claims for automobile accidents.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <b>Yes we would contact the owner to discuss fees, ownership and claim settlements. We also contact owners when the vehicle has allegedly been sold and there is no sellers report on file.</b>			

**Subscriber Roster** (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Farmers Insurance	Contact name Linda Swopes	Email linda.swopes@farmersinsurance.com	(Area code) Phone number 503-265-6071
	Address, City, State, Zip code 10200 SW Greenbury Rd. Suite 200 Portland OR 97223		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name Farmers Ins.	Contact name Mary Evenson	Email mary-evenson@farmersinsurance.com	(Area code) Phone number 360-619-2004
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name Farmers Ins	Contact name Matt Alderson	Email mattalderson@farmersinsurance.com	(Area code) Phone number 503-320-6143
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
4	Legal business name Farmers Ins.	Contact name Melissa Olchowy	Email melissa.olchowy@farmersinsurance.com	(Area code) Phone number 360-514-9411
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5	Legal business name Farmers Ins.	Contact name Guenna Brandon	Email guenna.brandon@farmersinsurance.com	(Area code) Phone number 360-514-9406
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
6	Legal business name Farmers Ins.	Contact name Mark McConnell	Email mark.mcconnell@farmersinsurance.com	(Area code) Phone number 503-730-4384
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
7	Legal business name Farmers Ins.	Contact name Andrew Pedersen	Email andrew.pedersen@farmersinsurance.com	(Area code) Phone number 360-514-9427
	Address, City, State, Zip code 1112 NE 51st Circle Vanc. WA 98682		Subscriber's permissible use Information is used in the processing of Ins. claims investigation.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

**Subscriber Roster** (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <b>Farmers Ins.</b>	Contact name <b>Michael McCoy</b>	Email <b>michael.mccoy@farmersinsurance.com</b>	(Area code) Phone number <b>360-514-9436</b>
	Address, City, State, Zip code <b>1112 NE 51st Circle Vanc. WA 98682</b>		Subscriber's permissible use <b>Information is used in the processing of ins. claims investigations.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

<p><u>1-19-18 Washington</u></p> <p>Date and place (county) signed</p>	<p><u>Linda Swopes</u></p> <p>PRINT or TYPE Name</p> <p><u>X Linda Swopes</u></p> <p>Signature of business or organization representative</p>
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**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

# Certificate of Authority

STATE OF WASHINGTON  
INSURANCE COMMISSIONER  
OLYMPIA

THIS IS TO CERTIFY, That, pursuant to the Insurance Code of the State of Washington,

FARMERS INSURANCE COMPANY OF WASHINGTON

of SEATTLE, WASHINGTON

laws of WASHINGTON

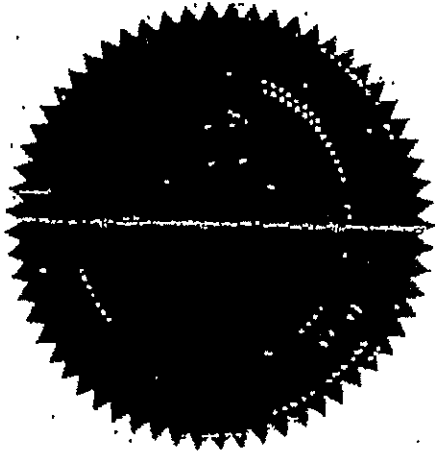
, organized under the  
having presented satisfactory evidence  
of compliance, this Certificate of Authority is hereby granted, authorizing the company to  
transact the following classes of insurance:

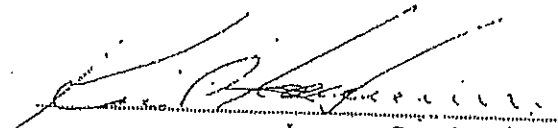
DISABILITY  
PROPERTY  
MARINE & TRANSPORTATION  
GENERAL CASUALTY  
SURETY

subject to all provisions of this Certificate as such classes are now or may hereafter be defined  
in the Insurance Laws of the State of Washington.

THIS CERTIFICATE is expressly conditioned upon the holder hereof now and hereafter  
being in full compliance with all, and not in violation of any, of the applicable laws and lawful  
requirements made under authority of the laws of the State of Washington as long as such laws  
or requirements are in effect and applicable, and as such laws and requirements now are, or  
may hereafter be changed or amended.

IN WITNESS WHEREOF, effective as of the 28TH day  
of JULY, 19 70, I have hereunto set my hand  
and caused my official seal to be affixed this 28TH day of  
JULY, 19 70



  
Insurance Commissioner

By \_\_\_\_\_  
Chief Deputy

## Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email (quickest)**

**cps@dol.wa.gov**

Print and scan or upgrade to

**Adobe Reader XI** or above to fill it in  
and save it.

**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Wilsonville Nissan</b>		Website	
Contact name, Primary applicant and contract manager <b>Chrissy Gelling</b>	(Area code) Telephone number <b>503-258-6213</b>	Email (required) <b>cgelling@tonkin.com</b>	
Contact name 2 (if applicable) <b>Theresa Burdick</b>	(Area code) Telephone number <b>503-261-5124</b>	Email (required) <b>tburdick@tonkin.com</b>	
Physical address of business (number and street) <b>26700 SW 95th</b>			
City <b>Wilsonville</b>		State <b>OR</b>	ZIP code <b>97070</b>
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>iVips account will be used to titling and registration purposes and to run inquiries on traded vehicles for duplicate titles.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information obtained using the iVips account will be used to contact the customer if required to complete the title and registration process.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/14/17 Clackamas County Oregon

Date and place (county) signed

Theresa Burdick

PRINT or TYPE Name

X

Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087





# BUSINESS LICENSE

City of Wilsonville  
29799 SW Town Center Loop E  
Wilsonville, OR 97070  
Phone: 503.570.1586

Location:

TONKIN WILSONVILLE NISSAN  
26700 SW 95TH AVE  
WILSONVILLE, OR 97070-9206

Mail:

GEE AUTOMOTIVE IX, LLC  
4560 SE INTERNATIONAL WAY  
209  
MILWAUKIE, OR 97222

License # : 00157779

Expiration Date : 06/30/2018

Business Type: Motor Vehicle Dealers

*THIS LICENSE MUST BE POSTED IN A CONSPICUOUS PLACE AT THE BUSINESS LOCATION*

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If you currently have a CPS number, enter it here 13a

Company/Agency name		Website	
Contact name. Primary applicant and contract manager	(Area code) Telephone number	Email (required)	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street)			
City		State	ZIP code
Mailing address of business (if different)			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <span style="background-color: black; color: white; padding: 0 10px;">6d</span>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

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**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

---

PRINT or TYPE Name

**X**

---

Date and place (county) signed

---

Signature of business or organization representative

#### **Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>3</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>4</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>5</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

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If you currently have a CPS number, enter it here

13a

Company/Agency name <b>Datalink Services, INC</b>		Website <b>www.IMVRS.com</b>	
Contact name. Primary applicant and contract manager <b>Mark Haddy</b>	(Area code) Telephone number <b>916-248-4886</b>	Email (required) <b>mhaddy@imvrs.com</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>2081 Arena Blvd Suite 190</b>			
City <b>Sacramento</b>		State <b>CA</b>	ZIP code <b>95834</b>
Mailing address of business (if different) <b>PO Box 340639</b>			
City <b>Sacramento</b>		State <b>CA</b>	ZIP code <b>95834</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Datalink Services, Inc provides driver's/vehicle records information to insurance/financial companies throughout the United States. We act as their agent for obtaining this information as it would be difficult for them to obtain access direct with the state and maintain that relationsi[ in a timely and efficient manner.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will sell the information to insurance companies, financial institutions, banks, lien sales and towing companies. Each of these organizations must be approved by our company and have a legitimate business use for this information. We do not have any attorneys or private investigators as end users for Washington vehicle data.			

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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

Mark Haddy

PRINT or TYPE Name

X

Signature of business or organization representative

1/4/2018

Date and place (county) signed

**Authorities:**

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
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**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
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Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name Please see attached.	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>2</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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*City of*  
**SACRAMENTO**

**BUSINESS OPERATIONS TAX CERTIFICATE**

96518

96518

Business Name DATALINK SERVICES INC  
Business Address 2081 ARENA BLVD 190  
Owner MARK HADDY  
Type of Business PUBLIC RECORDS RESEARCH  
Tax Classification 401

FROM  
Mo. Day Yr.  
04/01/2017

TO  
Mo. Day Yr.  
03/31/2018

Expires

TOTAL  
PAID: \$3,475.65

DATALINK SERVICES INC  
MARK HADDY  
PO BOX 340639  
SACRAMENTO, CA 95834-0718

**CITY OF SACRAMENTO**

VOID  
APR 10 2018 NOT  
VALIDATED

**PAID**

THIS STUB MAY BE  
FOLDED/DETACHED  
BEFORE POSTING

This certificate is not to be construed as a business license or imply that the City of Sacramento has investigated, or approves or recommends, the holder of this certificate. Any representation to the contrary is fraudulent. (This certificate must be renewed within 30 days of expiration).



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If you currently have a CPS number, enter it here \_\_\_\_\_

Company/Agency name <b>Fuller Computing Services, LLC</b>		Website <b>sandra@sandrafuller.com</b>	
Contact name. Primary applicant and contract manager <b>Sandra Fuller</b>	(Area code) Telephone number <b>405-350-2087</b>	Email (required) <b>fuller.s@cox.net</b>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <b>2105 Yellowstone Dr</b>			
City <b>Yukon</b>		State <b>OK</b>	ZIP code <b>73099</b>
Mailing address of business (if different) <b>same</b>			
City		State	ZIP code
Provide <b>one</b> of these identifiers	Taxpayer identification Number (TIN)	Employer Identification Number (EIN) <b>6d</b>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Notify owner and lien holders of abandoned vehicles and they will be sold for charges against the vehicles. Procedures are outlined in Oklahoma Statute 42-91A.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The owner and any lien holder will be contacted by certified mail only and send a notice of the abandoned vehicle. This information is then turned into the Oklahoma Tax Commission for approval of the possessory lien foreclosure process.</p>			

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

12/8/2017 Canadian  
Date and place (county) signed County

SANDRA FULLER  
PRINT or TYPE Name  
☒ Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

OFFICE OF THE SECRETARY OF STATE



CERTIFICATE  
OF  
LIMITED LIABILITY COMPANY

*WHEREAS, the Articles of Organization of*

**FULLER COMPUTING SERVICES, L.L.C.**

*an Oklahoma limited liability company, has been filed in the Office of the Secretary of State as provided by the laws of the State of Oklahoma.*

*NOW THEREFORE, I, the undersigned, Secretary of State of the State of Oklahoma, by virtue of the powers vested in me by law, do hereby issue this certificate evidencing such filing.*

*IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Oklahoma.*




Filed in the City of Oklahoma City this 18TH  
day of NOVEMBER, 1998.

*Sam Cole*  
Secretary of State

By: *Devin D*

**FULLER COMPUTING SERVICES, L.L.C.****Details**

Filing Number: 3500613653  
Name Type: Legal Name  
Status: In Existence   
Corp type: Domestic Limited Liability Company  
Jurisdiction: Oklahoma  
Formation Date: 18 Nov 1998

**Registered Agent Information**

Name: DAVID P FULLER  
Effective: N/A  
Address: 2105 YELLOWSTONE DR  
City, State , ZipCode: YUKON OK 73099



**Vehicle/Vessel On-line Access  
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

**Email** (quickest)[cps@dol.wa.gov](mailto:cps@dol.wa.gov)

Print and scan or upgrade to

[Adobe Reader](#) XI or above to fill it in  
and save it.**Mail**Vehicle Records Disclosure Unit  
Department of Licensing  
PO Box 2957  
Olympia, WA 98507**Fax**

(360) 570-7895

**Do not use this form for personal or individual record requests.  
Use the Vehicle or Boat Record Request forms located at [dol.wa.gov/forms/formspd.html](http://dol.wa.gov/forms/formspd.html)**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name <b>National General Insurance</b>		Website <b>ngic.com</b>	
Contact name. Primary applicant and contract manager <b>Tracie Hauser</b>	(Area code) Telephone number <b>3364353741</b>	Email (required) <b>tracie.hauser@ngic.com</b>	
Contact name 2 (if applicable) <b>Chris Bujnak</b>	(Area code) Telephone number <b>3364352979</b>	Email (required) <b>chris.bujnak@ngic.com</b>	
Physical address of business (number and street) <b>5630 University Pkwy</b>			
City <b>Winston-Salem</b>		State <b>NC</b>	ZIP code <b>27105</b>
Mailing address of business (if different) <b>PO Box 1623</b>			
City <b>Winston-Salem</b>		State <b>NC</b>	ZIP code <b>27102</b>
Provide <b>one</b> of these identifiers	Taxpayer Identification Number (TIN) <b>6d</b>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).  <b>Information is used in the processing of insurance claims.</b>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.  <b>We will contact the owner and provide the information to handle their insurance claim.</b>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact [cps@dol.wa.gov](mailto:cps@dol.wa.gov) to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

**CPS RECORD FEES:** There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

**Submit the following documentation with your application:**

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
  - Your current business license or
  - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
  - Your Articles of Incorporation, filed with the Secretary of State or
  - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

*By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
Tracie Hauser  
PRINT or TYPE Name

12/11/2017 Forsyth  
Date and place (county) signed

X *Tracie Hauser*  
Signature of business or organization representative

**Authorities:**

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725  
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02  
Washington Administrative Code (WAC) 308-10-075, 308-93-087

**Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)****Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

<b>1</b>	Legal business name <b>National General Insurance</b>	Contact name <b>Kim Duggins</b>	Email <b>kim.duggins@ngic.com</b>	(Area code) Phone number <b>336-435-8372</b>
	Address, City, State, Zip code <b>5630 University Pkwy, Winston-Salem, NC 27105</b>		Subscriber's permissible use  <b>Information is used in the processing of insurance claims.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>2</b>	Legal business name <b>National General Insurance</b>	Contact name <b>Jill Alverson</b>	Email <b>jill.alverson@ngic.com</b>	(Area code) Phone number <b>336-435-2646</b>
	Address, City, State, Zip code <b>5630 University Pkwy, Winston-Salem, NC 27105</b>		Subscriber's permissible use  <b>Information is used in the processing of insurance claims.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>3</b>	Legal business name <b>National General Insurance</b>	Contact name <b>Suzette Brown</b>	Email <b>suzette.brown@ngic.com</b>	(Area code) Phone number <b>336-435-3897</b>
	Address, City, State, Zip code <b>5630 University Pkwy, Winston-Salem, NC 27105</b>		Subscriber's permissible use  <b>Information is used in the processing of insurance claims.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>4</b>	Legal business name <b>National General Insurance</b>	Contact name <b>Deborah Schwartz</b>	Email <b>deborah.schwartz@ngic.com</b>	(Area code) Phone number <b>909-941-5760</b>
	Address, City, State, Zip code <b>5630 University Pkwy, Winston-Salem, NC 27105</b>		Subscriber's permissible use  <b>Information is used in the processing of insurance claims.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>5</b>	Legal business name <b>National General Insurance</b>	Contact name <b>Janet Jacobo</b>	Email <b>janet.jacobo@ngic.com</b>	(Area code) Phone number <b>336-435-5527</b>
	Address, City, State, Zip code <b>5630 University Pkwy, Winston-Salem, NC 27105</b>		Subscriber's permissible use  <b>Information is used in the processing of insurance claims.</b>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>6</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>7</b>	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

**Use additional copies of this page, if needed.** You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

# Redaction Log

Reason	Page (# of occurrences)	Description
13a	1 (1)	RCW 42.56.420(4). Security – Computer and Telecommunications Networks. Information regarding the infrastructure and security of computer and telecommunications networks, consisting of security passwords, security access codes and programs, access codes for secure software applications, security and service recovery plans, security risk assessments, and security test results to the extent that they identify specific system vulnerabilities.
	5 (1)	
	9 (1)	
	11 (1)	
	20 (1)	
	24 (1)	
	26 (1)	
	29 (1)	
	33 (1)	
	37 (1)	
	41 (1)	
	44 (1)	
	47 (1)	
	49 (1)	
	55 (1)	
	58 (1)	
	61 (1)	
	64 (1)	
	68 (1)	
	72 (1)	
	78 (1)	
	81 (1)	
	85 (1)	
	89 (1)	
	93 (1)	
	98 (1)	
	101 (1)	
	105 (1)	
	109 (1)	
	113 (1)	
	116 (1)	
	119 (1)	
	122 (1)	
	125 (1)	
	129 (1)	
	134 (1)	
	141 (1)	
	144 (1)	
	145 (1)	
	152 (1)	



Reason	Page (# of occurrences)	Description
	156 (1)	
	159 (1)	
	162 (1)	
	164 (1)	
	170 (1)	
	176 (1)	
	180 (21)	
	184 (1)	
	186 (1)	
	190 (1)	
	193 (1)	
	206 (1)	
	209 (1)	
	212 (1)	
	215 (1)	
	220 (1)	
	235 (1)	
6a	57 (2)	RCW 42.56.230(5); RCW 9.35.005. Personal Information – Financial Information. Credit card numbers, debit card numbers, electronic check numbers, card expiration dates, social security numbers, bank or other financial information identified in RCW 9.35.005. Information in RCW 9.35.005 is information identifiable to an individual that concerns the amount or conditions of an individual’s assets, liabilities or credit: account numbers and balances; transactional information concerning an account; codes, passwords, social security numbers, tax identification numbers, driver’s license or permit numbers, state identicard numbers issued by the Department of Licensing, and other information held for the purpose of account access or transaction initiation.
	225 (2)	
	231 (2)	
	234 (2)	
	11 (1)	
	15 (1)	
	20 (1)	
	24 (1)	
	29 (1)	
	33 (1)	
	37 (1)	
	41 (1)	
	44 (2)	
	55 (1)	
	58 (1)	
	61 (1)	
	64 (1)	
	68 (1)	
	76 (1)	
	81 (1)	
	89 (1)	
	93 (1)	

Reason	Page (# of occurrences)	Description
6d	101 (1)	RCW 42.56.230(4); 42 U.S.C. § 405(c)(2)(C)(viii)(I); RCW 42.56.070(1). Personal Information – Tax ID. Information required of any taxpayer in connection with the assessment or collection of any tax (Social Security Number) is protected from disclosure.
	105 (1)	
	109 (1)	
	113 (1)	
	119 (1)	
	129 (1)	
	138 (1)	
	141 (1)	
	145 (1)	
	148 (1)	
	152 (1)	
	156 (1)	
	159 (1)	
	162 (1)	
	164 (1)	
	167 (1)	
	170 (1)	
	173 (1)	
	176 (1)	
	184 (1)	
	186 (2)	
	190 (1)	
	195 (1)	
	197 (1)	
	200 (1)	
	203 (1)	
	209 (1)	
	212 (1)	
	215 (1)	
	220 (1)	
	223 (1)	
	226 (1)	
	229 (1)	
	232 (1)	
	235 (1)	
	241 (3)	

# Redaction Log

Reason	Page (# of occurrences)	Description
13a	246 (1)	RCW 42.56.420(4). Security – Computer and Telecommunications Networks. Information regarding the infrastructure and security of computer and telecommunications networks, consisting of security passwords, security access codes and programs, access codes for secure software applications, security and service recovery plans, security risk assessments, and security test results to the extent that they identify specific system vulnerabilities.
	249 (1)	
	253 (1)	
	256 (1)	
	260 (1)	
	268 (1)	
	271 (1)	
6d	279 (1)	RCW 42.56.230(4); 42 U.S.C. § 405(c)(2)(C)(viii)(I); RCW 42.56.070(1). Personal Information – Tax ID. Information required of any taxpayer in connection with the assessment or collection of any tax (Social Security Number) is protected from disclosure.
	246 (1)	
	253 (1)	
	256 (1)	
	265 (1)	
	268 (1)	
	271 (1)	
	275 (1)	
	279 (1)	